

LIBRARY



Borough of Lowestoft
and
Lowestoft Port Health Authority

ANNUAL REPORT

OF THE

**Medical Officer of Health
for 1937**

REPORT

OF THE

**Chief Sanitary Inspector
for 1937**

LOWESTOFT:

M. F. Robinson & Co. Ltd., The Library Press



Borough of Lowestoft
and
Lowestoft Port Health Authority

ANNUAL REPORT
OF THE
**Medical Officer of Health
for 1937**

REPORT
OF THE
**Chief Sanitary Inspector
for 1937**

LOWESTOFT :
M. F. Robinson & Co. Ltd., The Library Press

Table of Contents

COMMITTEES	...	...	...	...	...	...	3
STAFF	...	...	...	...	...	...	4
INTRODUCTION	...	...	...	...	...	...	5
SECTION A.	STATISTICS AND SOCIAL CONDITIONS OF THE AREA.						
	VITAL STATISTICS	...	...	...	...	...	7
	GENERAL STATISTICS	...	...	...	...	...	8
	PHYSICAL FEATURES AND CLIMATE	...	...	...	...	...	8
	SOCIAL CONDITIONS	...	...	...	...	...	10
	EXTRACTS FROM VITAL STATISTICS	...	...	...	...	...	12
	POPULATION, MARRIAGE-RATE, BIRTH-RATE, DEATH-RATE INFANT MORTALITY, AND CAUSES OF INFANT DEATH	...	...	...	...	...	13
SECTION B.	GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA.						
	STAFF	...	...	...	...	...	22
	LABORATORY AND AMBULANCE FACILITIES	...	...	...	...	...	22
	NURSING IN THE HOME	...	...	...	...	...	23
	TREATMENT CENTRES AND CLINICS	...	...	...	...	...	23
	HOSPITALS	...	...	...	...	...	25
	MIDWIFERY AND MATERNITY SERVICES	...	...	...	...	...	26
	HEALTH VISITORS	...	...	...	...	...	32
	INFANT LIFE PROTECTION	...	...	...	...	...	32
	ORTHOPAEDIC TREATMENT	...	...	...	...	...	33
	NURSING HOMES REGISTRATION	...	...	...	...	...	33
SECTION C.	SANITARY CIRCUMSTANCES OF THE AREA.						
	WATER	...	...	...	...	...	34
	DRAINAGE AND SEWERAGE	...	...	...	...	...	35
	CLOSET ACCOMMODATION	...	...	...	...	...	35
	PUBLIC CLEANSING	...	...	...	...	...	36
	SANITARY INSPECTION OF THE AREA	...	...	...	...	...	36
	SHOPS ACTS	...	...	...	...	...	39
	SMOKE ABATEMENT	...	...	...	...	...	40
	SWIMMING BATHS AND POOLS	...	...	...	...	...	40
	ERADICATION OF BED BUGS	...	...	...	...	...	40
	SCHOOLS	...	...	...	...	...	40
	PREMISES AND OCCUPATIONS WHICH CAN BE CONTROLLED BY BYELAWS OR REGULATIONS	...	...	...	...	...	41
	FACTORIES AND WORKSHOPS	...	...	...	...	...	42
SECTION D.	HOUSING.						
	INSPECTION	...	...	...	...	...	44
	REMEDYING OF DEFECTS	...	...	...	...	...	45
	ACTION UNDER STATUTORY POWERS	...	...	...	...	...	45
	OVERCROWDING	...	...	...	...	...	45
	CLEARANCE AREAS	...	...	...	...	...	47
	REDEVELOPMENT AREA	...	...	...	...	...	49
SECTION E.	INSPECTION AND SUPERVISION OF FOOD.						
	MILK SUPPLY	...	...	...	...	...	50
	MEAT	...	...	...	...	...	50
	OTHER FOODS	...	...	...	...	...	51
	ADULTERATION OF FOOD	...	...	...	...	...	52
	NUTRITION	...	...	...	...	...	53
	SHELLFISH (MOLLUSCAN)	...	...	...	...	...	53
SECTION F.	PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES.						
	NOTIFIABLE DISEASES	...	...	...	...	...	54
	ISOLATION HOSPITAL TREATMENT	...	...	...	...	...	61
	IMMUNIZATION AND VACCINATION	...	...	...	...	...	63
	PREVENTION OF BLINDNESS	...	...	...	...	...	63
	TUBERCULOSIS	...	...	...	...	...	64
	DISINFECTION	...	...	...	...	...	65
SECTION G.	MISCELLANEOUS.						
	COST OF HEALTH SERVICES	...	...	...	...	...	66
	AIR RAID PRECAUTIONS	...	...	...	...	...	66
SECTION H.	REPORT OF THE PORT HEALTH AUTHORITY.						67
REPORT OF THE CHIEF SANITARY INSPECTOR							76

MEMBERS OF COMMITTEES, 1937

HEALTH COMMITTEE

His Worship the Mayor : Alderman MAJOR S. W. HUMPHERY, T.D., J.P.

Deputy Mayor : Councillor WILLIAM SMITH, J.P., F.S.A.A.

Chairman : Councillor Dr. J. C. MEAD, J.P.

Vice-Chairman : Mr. Alderman F. LARKE.

Aldermen :

A. B. CAPPS, J.P.

A. EVANS, J.P.
F. LARKE.

Mrs. G. M. HARRIS, J.P.

Councillors :

F. S. AYERS

Dr. H. C. BARRACLOUGH

W. BUCKLEY

F. BURTON

S. E. CLARKE

W. J. CROFT

P. GREASLEY

G. T. HUME

J. KNIGHTS-JONES

Miss MANN

G. F. SPASHETT, J.P.

J. W. WOODROW

MATERNITY AND CHILD WELFARE COMMITTEE

His Worship the Mayor : Alderman MAJOR S. W. HUMPHERY, T.D., J.P.

Chairman : Mrs. Alderman HARRIS, J.P.

Mr. Alderman	EVANS, J.P.	Mr. Councillor	G. T. HUME	Mrs. G. T. ATKINSON
Mr. Councillor	ALLERTON	„ „	J. K. JONES	„ H. W. BAYFIELD
„ „	F. S. AYERS	„ „	Dr. J. C. MEAD J.P.	„ W. BUCKLEY
„ „	Dr. BARRACLOUGH	„ „	W. MOBBS	„ A. EVANS
„ „	S. E. CLARKE	„ „	G. F. SPASHETT J.P.	„ W. E. HOLLOWELL
		„ „	J. W. WOODROW	

ISOLATION HOSPITAL SUB-COMMITTEE

His Worship the Mayor : Alderman MAJOR S. W. HUMPHERY, T.D., J.P.

Chairman : Mr. Alderman F. LARKE

Councillors :

Dr. H. C. BARRACLOUGH

G. F. SPASHETT, J.P.
J. W. WOODROW

Dr. J. C. MEAD, J.P.

JOINT SMALLPOX AND QUARANTINE HOSPITAL COMMITTEE

His Worship the Mayor : Alderman MAJOR S. W. HUMPHERY, T.D., J.P.

Chairman : Mr. Councillor G. F. SPASHETT, J.P.

Councillor Dr. H. C. BARRACLOUGH
Rev. S. R. BONSEY

Mr. Alderman F. LARKE
Mr. J. SLATER

Public Health Staff

Medical Officer of Health, Port Medical Officer, Medical Superintendent of the Isolation Hospital and School Medical Officer :

STUART F. ALLISON, M.B., Ch.B., D.P.H. (until 31-3-37)
VICTOR R. WALKER, M.B., Ch.B., B.Sc., D.P.H. (from 7-6-37)

Deputy Medical Officer of Health for General Sanitary Administration and Port :

LAURENCE GIBSON, M.B., Ch.B., D.P.H.

Assistant Medical Officer of Health for Maternity and Child Welfare and for Schools :

SYBIL O. EDWARDS, M.B., Ch.B., D.P.H.

Dental Officer for Maternity and Child Welfare and for Schools :

CLIFFORD L. DAWSON, L.D.S.

Obstetric Consultant :

MICHAEL W. BULMAN, M.D., M.S., F.R.C.S., M.C.O.G

Public Analyst :

W. LINCOLNE SUTTON, F.I.C.

Veterinary Surgeon :

J. M. CURRIE, M.R.C.V.S.

Chief Sanitary Inspector :

A. ISHERWOOD, C.R.S.I., M.S.I.A., Cert. Meat Inspector

Assistant Sanitary Inspectors :

WM. HAWORTH, C.R.S.I., M.S.I.A., Cert. Meat Inspector.
L. C. CORLETT, C.R.S.I., M.S.I.A., Cert. Meat Inspector (until 30-11-37)
RAYMOND P. LONG, C.R.S.I., M.S.I.A., Cert. Meat Inspector.

Matron of Borough Isolation Hospital :

Miss D. P. FENN, S.R.N.

Combined Health Visitors and School Nurses :

Mrs. E. WHITROD (a) (b)	Miss W. LARGE (a) (c)
Miss M. SHIPPERBOTTOM (a) (b)	
Miss A. ARBON (a) (b) (d)	Miss W. IRWIN (a) (b) (c) (d)

Municipal Midwives :

Miss E. VINCENT (a)
Mrs. A. THIRTLE (a)

(a) State Certified Midwife
(c) Fever Training

(b) General Hospital Certificate
(d) Health Visitors Certificate

Chief Clerk :

Miss C. E. ABBOTT

Clerical Staff for all Departments :

Miss D. GOULDBY	Miss P. RAYMENT*	F. W. BUCKLEY
Miss E. LONG	Miss N. TURRELL	R. TURNER

* Dental Attendant

PUBLIC HEALTH DEPARTMENT,
CONNAUGHT HOUSE,
LOWESTOFT.

*To His Worshipful the Mayor and to the Aldermen and Councillors
of the Borough of Lowestoft.*

MR. MAYOR, LADIES AND GENTLEMEN,

I have the honour to submit my Annual Report on the Health of the Borough for 1937, detailed in accordance with the instructions of the Minister of Health. The report of the Chief Sanitary Inspector is appended.

Vital Statistics.—The Registrar-General's estimated figure for the population of the Borough shows a reduction from 44,830 to 44,440. The most remarkable local feature has been the birth-rate, which, rising to 16.0 per 1,000, from 14.1 in 1936, exceeds for the first time since 1932, the rate for England and Wales (14.9). This rise is shown to be probably explainable by the markedly increased local marriage rate since 1934. There is again a slight rise in the death-rate from 11.2 to 11.4 (England and Wales 12.4), probably due to the ageing of the general population, since all mortality rates for the area continue favourable compared with previous years. The infant mortality rate of 46.5 per 1,000 is again well below that for England and Wales (58), and the still-birth rate is the lowest since registration was instituted in 1926.

Infectious Diseases.—The local incidence of serious infectious disease has been low during the year. A striking feature has been the infrequency of diphtheritic illness, with a complete absence of mortality for the first time for a long period of years. In consequence, the most important infection during the year has been whooping cough, which caused the unfortunate loss of three young infant lives.

Maternity and Child Welfare.—The most important development during the year has been the establishment, by direction of the Midwives Act, 1936, of a domiciliary service of midwives under the control of the Local Supervising Authority for attendance upon lying-in women in their homes both as midwives and maternity nurses. By improving the status of the previous poorly recognized profession of midwifery, there is every expectation that a sound service may be built up for the confinement of normal cases in their own homes, for which the services of a competent, well-trained and self-reliant midwife is the first necessity.

The opening in November of the South Lowestoft Welfare Centre in Southwell Road was made the occasion for a Child Welfare Exhibition lasting for the week. The greatly improved facilities for maternal and child welfare provided by the new premises is already reflected by increased figures of attendances by children and mothers.

Housing.—After a local inquiry into objections in May the Re-development Plan for the Beach Area received the approval of the Minister, and preparations are advanced for its redevelopment after purchase by agreement or compulsory order.

The position at the end of the year as regards the operation of the Overcrowding Act in the Borough is reported in Section D. (Housing).

Special thanks are again due to the Chairman and Members of the Committees associated with the Health Department and to the voluntary helpers who have continued to afford willing assistance at the weekly welfare centres. I have also to express my indebtedness to the Deputy and Assistant Medical Officers and to the staffs of the Health Department and Isolation Hospital for their competent and loyal assistance.

I am, Mr. Mayor, Ladies and Gentlemen,

Your obedient Servant,

VICTOR R. WALKER.

Medical Officer of Health.

Vital Statistics for the Year 1937

	<i>Total</i>	<i>M.</i>	<i>F.</i>
Live Births —Legitimate	681	339	342
Illegitimate	28	20	8
	<hr/>	<hr/>	<hr/>
Total	709	359	350
	<hr/>	<hr/>	<hr/>

				<i>Lowestoft</i>	<i>Comparative figures for England & Wales</i>
Birth-Rate per 1,000 of the estimated resident population	...	...	...	16.0	14.9
	<i>Total</i>	<i>M.</i>	<i>F.</i>		
Stillbirths —	21	12	9		
Rate per 1,000 total (live and still) births	...			28.8	39.0
	<i>Total</i>	<i>M.</i>	<i>F.</i>		
Deaths —	507	261	246		
Rate per 1,000 of the estimated resident population	...	...	...	11.4	12.4
Deaths from Puerperal Causes —					
Puerperal Sepsis	...	...	0		
Other Puerperal Causes	...	...	1		
	<hr/>				
Total	1				
	<hr/>				
Rate per 1,000 total (live and still) births	...			1.4	3.11
Death-Rate of Infants under one year of age —					
All infants per 1,000 live births	...			46.5	58.0

Deaths from Cancer (all ages)	...	...	67
„ „ Tuberculosis (all forms)	...	...	26
„ „ Measles (all ages)	...	...	Nil
„ „ Whooping Cough (all ages)	...	...	3
„ „ Diarrhoea (under 2 years of age)	...	...	1

SECTION A.

STATISTICS AND SOCIAL CONDITIONS OF THE AREA

GENERAL STATISTICS

Area (including foreshore)	...	...	(Acres)	5,495
Population (Census 1931) ...	...	...	...	41,768
Population (estimated mid-1937 by Registrar-General)				44,440
Number of inhabited houses according to rate books (December, 1937) ...	...	...	...	11,628
Rateable Value ...	...	...	...	£251,052
Sum represented by a penny rate		...	...	£954

PHYSICAL FEATURES AND CLIMATE

Lowestoft stands on the most easterly point in the British Isles and shares with the coastal region of East Anglia a very small rainfall and a record of sunshine much above the average for the whole country. The Borough is divided into two portions by a harbour created from Lake Lothing, from which the sea frontage of $4\frac{1}{2}$ miles rises at each end with natural cliffs, rather higher at Gunton in the north than at Pakefield in the south. The town is particularly fortunate to possess a large number of natural parks and open spaces available to the public, which must contribute greatly to the health and physical fitness of the inhabitants by providing facilities for outdoor activity and recreation.

The climate is invigorating by reason of the large proportion of sunshine and fresh breezes, and the low rainfall combined with an almost complete absence of fog and atmospheric pollution permits full participation in the health-giving properties of sun and air.

The following meteorological summary is afforded by courtesy of the Meteorological Observer. From the observations of the prevailing winds it will be noted that any reputation for undue prevalence of easterly winds is hardly warranted, since the proportion of such is fairly low except in the early months of the year

METEOROLOGICAL SUMMARY FOR THE YEAR 1937

Rainfall	... ..	24.97 inches.
Highest recorded Barometric Readings		30.704 on December 26th.
Lowest recorded Barometric Readings		29.062 on December 14th.
Highest temperature in the shade		82° September 7th.
Lowest temperature in the shade	...	25° December 28th.
Total amount of sunshine	... ..	1387.2 hours.
Number of sunless days	... ..	106.
Mean annual temperature	... ..	49.5.
Mean maximum temperature	... ..	54.9°
Difference from average	... ..	+0.7°
Number of days on which rain fell		230

PREVAILING WINDS DURING 1937

One Reading per day

TOTAL OBSERVATIONS

			N.	NE.	E.	SE.	S.	SW.	W.	NW.
January	...	...	2	—	5	3	9	5	2	5
February	...	...	—	—	1	3	—	9	7	8
March	...	...	1	5	7	1	2	6	5	4
April	...	...	7	5	4	2	2	2	4	4
May	...	...	3	6	7	2	4	1	3	5
June	...	...	1	4	1	5	—	2	10	7
July	...	...	3	3	—	3	3	7	2	10
August	...	...	6	4	5	3	4	—	5	4
September	...	...	2	1	2	3	2	8	5	7
October	...	...	—	3	6	3	5	2	5	7
November	...	...	3	5	5	2	1	1	11	2
December	...	...	1	2	6	1	2	5	6	8
<i>Totals</i>	...	...	29	38	49	31	34	48	65	71

SOCIAL CONDITIONS

Chief Industries in the Area.

The nature of the main modes of employment in the Borough are as follows:—Fishing; Food Preserving and Canning; Distributive Trades; Motor Coach Body Building; Artificial Silk; Railway Service; Hotels and Boarding Houses; Local Government Work; Motor Accessories; Shipbuilding and Repairs; General Engineering; Building and Contracting; Timber Imports and Saw-Milling; Laundry; Road Transport; Net Making; Hospitals; Theatres, Picture Palaces and Entertainments; and Printing.

Extent of Unemployment in the Area.

Based on an insurable population over 18 years of 14,000 for the year ending July, 1937, the figures of unemployment kindly supplied by the Manager of the local Employment Exchange for each month at the date nearest the mid-point gives monthly percentages of unemployed as follows:—

	%		%
January ...	16.5	July ...	9.6
February ...	19.6	August ...	9.2
March ...	20.6	September ...	10.7
April ...	16.9	October ...	8.5
May ...	14.1	November ...	9.3
June ...	10.2	December ...	22.2

It will be seen from the average percentage of unemployment (13.9%) that the Borough continues relatively depressed industrially for a town in the southern half of England. Also compared to other areas a higher proportion of unemployment is seasonal, with a high rate from December to March and a low rate from July to November. Probably from rationalization in management the increased activity in the fishing industry is not proportionately reflected in increased employment, and a "hard core" of unemployment still exists. Furthermore, variability in the incomes of wage earners seasonally employed must militate against the economical family budgeting more easily effected where employment is regular and reasonably secure throughout the year.

Any Evidence, Statistical or otherwise, that Unemployment has exercised any significant influence on the Health or Physique of Children or Adults.

Reliable evidence of such is extremely difficult to obtain, and none can be produced relating specifically to the influence of unemployment existing at a given time. Where working-class wages in an area are relatively low from industrial depression poverty and hardship are determined by the number of dependents in the family group and their food requirements. Particularly in certain

employments a household, where the size of family is considerably above the average, may be better off on unemployment scales which, unlike wages, take into consideration the number of dependants. In the Annual Report of the School Medical Officer for 1937 the section reporting nutritional findings at routine inspection draws attention to certain disquieting features in regard to the nutrition of a proportion of the school children, particularly those of large families, and more especially the boys in the senior age group. Such evidence may not reflect factors at present operating, but rather a late result of the extreme depression of the local industry of fishing in recent past years, when this age group was at a more tender age and less resistant to hardship. It is certain that the physical inheritance in such section of the population must be well above the average and this, together with the capacity for withstanding hardship undoubtedly possessed by such a class, must have minimized deterioration of health or physique through long economic depression. It does not always seem sufficiently realized that the physiological food requirements of a boy of 14 are at least equivalent to those of an adult man. By food is not meant bread alone—especially civilized white bread—but a diet containing a correct proportion of the more expensive first-class foodstuffs required for the proper nutrition of the growing body. The basic cost of such is the first factor in determining whether sound alimentation can exist in a family containing a number of dependent children above the average. With the higher age of compulsory school attendance any rise in food costs might in such families weigh more against the healthy physical development of the adolescent than the favourable environmental factors of prolonged school attendance would do in its favour. It has recently been increasingly realized that sound nutrition is influenced more by sound alimentation than by all other environmental factors together, and for such the availability within the family income of a sound balanced diet is a matter of first importance.

Housing Conditions.

Second in importance only to proper feeding as a factor affecting the health of the community, the standard of housing of the working-classes continues slowly to be improved at its lowest level by the operation of Clearance Orders at points where there has existed congested arrangements of dwellings or a standard of housing prejudicial to health. When demolition of such areas has been completed according to the intention of the Housing Acts, slum conditions will cease to exist, though since much of the working-class housing in the Borough is of a fair age small groups of houses and individual dwellings will require action at intervals through falling below the general standard of working-class accommodation for the area and considerable obsolescent housing showing poor entry of light and air and dampness within allowable limits must continue to exist for a very long time. The Borough has shown little natural increase of population since the War and from this,

combined with the factor of industrial depression, the proportion of new houses available for renting by the working-classes is fairly low compared with many areas.

To contribute to increased general health any new housing should be at a reasonable rent relative to working-class incomes in the area, since food ought to be the first charge on a family budget. In this connection cases of marked impairment of nutrition in a family are most frequently met with where, through reduction of family income to minimum scales, such proportions as two-fifths, and sometimes more, of weekly income may be expended on rent or house purchase by instalments, with consequent adverse effect on food purchasing power. From the above consideration a local authority will in any housing project make the greatest contribution to the Public Health if it formulates plans for houses of simple construction permitting the lowest possible weekly rent to be charged. Certainly the greatest public benefaction would be obtained from any plan which, by simplifying methods of construction, succeeded in reducing substantially the cost of housing accommodation for the working-classes.

EXTRACTS FROM VITAL STATISTICS OF THE YEAR

	<i>Total</i>	<i>M.</i>	<i>F.</i>	
Live Births—Legitimate	681	339	342	Birth Rate per 1,000 of the estimated resident population 16.0
Illegitimate	28	20	8	
Stillbirths 	21	12	9	Rate per 1,000 total (live and still) births 28.8
Deaths	507	261	246	Death Rate per 1,000 of the estimated resident population 11.4

Deaths from puerperal causes—

	<i>Deaths</i>	<i>Rate per 1,000 total (live and still) births</i>
No. 29 Puerperal sepsis	0	0.0
No. 30 Other puerperal causes ...	1	1.4
<i>Total</i>	1	1.4

Death Rate of Infants under one year of age—

All infants per 1,000 live births 	46.5
Legitimate infants per 1,000 legitimate live births ...	42.6
Illegitimate infants per 1,000 illegitimate live births ...	142.9

Deaths from Cancer (all ages) 	67
„ „ Measles (all ages) 	Nil
„ „ Whooping Cough (all ages) 	3
„ „ Diarrhoea (under 2 years of age) 	1

There was no unusual or excessive mortality during the year requiring special comment, and no cause of sickness or invalidity has been specially noteworthy.

Population.

The Registrar-General's estimate for the population at the middle of 1937 is 44,440 ; this figure is used in calculating all birth, marriage and mortality rates for the area.

The above intercensal estimate gives a reduction of population by 390 from the figure for the previous year. As after adjustment for inward and outward transfers the live births exceed the deaths by 202—a " natural " increase of population, the estimated fall in population must be ascribed to an adverse balance by migration outwards from the area of 592 persons. With the recent increase in birth and marriage rates, which reflect improved economic conditions, it is unlikely that there will be any further such marked reductions in the population estimate during the immediate succeeding years.

Marriages.

The number of marriages and rate per 1,000 (of persons married) for the past ten years for the area was as follows :—

<i>Year</i>	1928	1929	1930	1931	1932	1933	1934	1935	1936	1937
<i>Number</i>	370	364	370	344	355	344	420	451	448	451
<i>Rate per 1,000 population</i>	16.1	16.1	16.4	16.7	16.6	16.2	19.0	20.1	20.0	20.3

It will be seen that probably due to improved employment in the area there has been a marked increase in the number and rate since 1934, which is the most probable factor in the reversal in 1937 of the lower level of local birth-rate relative to England and Wales existing since 1931. The marriage rate of 20.3 for Lowestoft compared with a figure of 17.4 for England and Wales for the year 1937.

Births.

The number of live births registered during the year, corrected for transfers, is 709, of which 359 were male and 350 were female ; of the total, 28 (4.0%) were illegitimate births.

The birth-rate for the year was 16.0, which shows a marked increase over the figure of 14.07 for 1936. The figure is significantly in excess of the rate of 14.9 for England and Wales, and that of 15.3 for the 148 small towns of comparable population. The number is 78 over the registered births for 1936 and is higher than any year since 1930. The rate per 1,000 resident population is higher than any year since 1931, and for the first year since 1932 exceeds the rate for England and Wales as a whole, showing a rise of 1.8 per 1,000 as against a corresponding rise for England and Wales of 0.1. In each the deduction can be drawn that the steady downward trend of the last two decades has been temporarily reversed by improved economic conditions. A reference to the

number and rate per 1,000 of marriages for the Borough for the last 10 years will show how the factor of variable industrial prosperity has both acted and reacted in the area more markedly than in England and Wales as a whole. The increased birth-rate must be ascribed to a markedly increased marriage rate in Lowestoft since 1934, following postponement of many marriages in the years of acute national depression, rather than to any increased fertility rate in the population of the area. The following table compares the birth-rates for England and Wales, the smaller (comparable) towns, and Lowestoft for the last ten years :—

	1928	1929	1930	1931	1932	1933	1934	1935	1936	1937
<i>England & Wales</i>	16.7	16.3	16.3	15.8	15.3	14.4	14.8	14.7	14.8	14.9
<i>Smaller Towns</i>	16.6	16.0	16.2	15.6	15.4	14.5	15.0	14.8	14.8	15.3
<i>Lowestoft</i>	15.6	14.5	16.9	16.9	15.8	13.7	14.6	14.4	14.1	16.0

Notification of Births Act.

The following table indicates the number of notified births in the various wards during the year, together with the ward distribution of stillbirths and infant deaths :—

WARD	<i>Live Births</i>	<i>Stillbirths</i>	<i>Infant Deaths</i>
North	139	2	11
South	227	9	8
East	108	4	7
West	141	5	3
Oulton Broad	89	1	4
	704	21	33

Stillbirths.

There were 21 stillbirths registered, 12 male and 9 female, all legitimate, and no adjustment was required.

The stillbirth rate was 0.47 compared with a rate of 0.60 for England and Wales, the rate for the smaller towns being 0.64.

Deaths.

The total number of deaths registered in the Borough in 1937 was 472. Inward transfers amounted to 85, of which 57 occurred in Lothingland House Infirmary; after deducting the outward transferable deaths of non-residents the net total was 507, consisting of 261 males and 246 females, against a figure of 506 for 1936.

The crude death rate was 11.4 per 1,000 compared with 11.2 in 1936; the death rate for England and Wales for the year was 12.4, and the rate for 148 smaller towns (with population from 25,000 to 50,000) was 11.9. To make adjustments for local age and sex distributions the Registrar-General supplies an Area Comparability Factor of 0.97 which, applied to the above crude death rate, gives an adjusted local death rate for the year of 11.07.

Causes of Death.

The causes of death are given in this table supplied by the Registrar-General :—

Causes of death						M.	F.	Total
All Causes						261	246	507
1.	Typhoid and Paratyphoid Fevers	...	...	...	...	—	—	—
2.	Measles	...	...	...	...	—	—	—
3.	Scarlet Fever	...	...	...	...	—	1	1
4.	Whooping Cough	...	...	...	...	1	2	3
5.	Diphtheria	...	...	...	...	—	—	—
6.	Influenza	...	...	...	...	13	9	22
7.	Encephalitis Lethargica	...	...	...	...	—	5	5
8.	Cerebro-Spinal Fever	...	...	...	...	—	1	1
9.	Tuberculosis of respiratory system	...	...	...	...	13	8	21
10.	Other Tuberculosis Diseases	...	...	...	...	1	4	5
11.	Syphilis	...	...	...	...	3	2	5
12.	General paralysis of the insane, tabes dorsalis	...	...	...	...	2	—	2
13.	Cancer, malignant disease	...	...	...	...	30	37	67
14.	Diabetes	...	...	...	...	4	3	7
15.	Cerebral Hæmorrhage, etc.	...	...	...	...	15	10	25
16.	Heart Disease	...	...	...	...	52	56	108
17.	Aneurysm	...	...	...	...	—	—	—
18.	Other circulatory diseases	...	...	...	...	10	11	21
19.	Bronchitis	...	...	...	...	9	17	26
20.	Pneumonia (all forms)	...	...	...	...	15	13	28
21.	Other respiratory diseases	...	...	...	...	3	6	9
22.	Peptic Ulcer	...	...	...	...	2	2	4
23.	Diarrhoea, etc. (under 2 years)	...	...	...	...	1	—	1
24.	Appendicitis	...	...	...	...	4	2	6
25.	Cirrhosis of Liver	...	...	...	...	1	—	1
26.	Other Diseases of Liver, etc.	...	...	...	...	2	—	2
27.	Other Digestive diseases	...	...	...	...	4	1	5
28.	Acute and Chronic Nephritis	...	...	...	...	5	2	7
29.	Puerperal Sepsis	...	...	...	...	—	—	—
30.	Other puerperal causes	...	...	...	...	—	1	1
31.	Congenital Debility, Premature Birth and Malformation	...	...	...	...	9	9	18
32.	Senility	...	...	...	...	20	19	39
33.	Suicide	...	...	...	...	6	4	10
34.	Other violence	...	...	...	...	10	4	14
35.	Other defined diseases	...	...	...	...	24	17	41
36.	Causes ill-defined or unknown	...	...	...	...	2	—	2
Special causes (included in No. 35 above)								
	Smallpox	...	...	...	...	—	—	—
	Poliomyelitis	...	...	...	...	—	—	—
	Polio-encephalitis	...	...	...	...	—	—	—

The chief causes of death in Lowestoft during the year will be seen to have been :—1. Heart Diseases (108), 2. Cancer (67), 3. Senility (39), 4. Pneumonia, all forms (28), 5. Bronchitis (26), 6. Cerebral Haemorrhage (25), 7. Influenza (22), and 8. Pulmonary Tuberculosis (21). The chief variation from expectation is the figure of 22 deaths from influenza, associated with such prevalence early in the year. As however almost all cases so certified were in

elderly age groups, and the figure for Senility had fallen from the previous year, it is likely that the latter was a marked contributory cause in the group.

Among respiratory causes the rise of Pneumonia from 26 to 28 and Bronchitis from 10 to 26 can be largely ascribed to the prevalence of influenza in the higher age groups and the influence of whooping cough infection as the cause of respiratory complications in infancy.

The age distribution of the deaths is shown in the following table, with the figures and rates of the last 5 years for comparison :

<i>Age group</i>	1932	1933	1934	1935	1936	1937
Under 1 year ...	38	27	23	22	28	33
1 and under 2 ...	3	4	6	7	6	5
2 and under 5 ...	4	3	13	9	5	5
5 and under 15 ...	7	9	20	6	11	13
15 and under 25 ...	23	19	15	17	20	10
25 and under 45 ...	50	57	45	30	36	40
45 and under 65 ...	110	115	110	121	114	125
65 and upwards ...	236	241	252	263	286	276
Total Deaths (all ages)	471	475	484	475	506	507
Death Rates ...	11.0	11.18	10.9	10.6	11.2	11.4

It will be noted that deaths in the age groups under 45 years decline, while continuous increases occur at ages over 45 years by reason of the higher proportions of the population now living in those age distributions.

ZYMOTIC DEATH RATE

The Zymotic Death Rate during the year was 0.11, the rate for the last five years and the deaths from the scheduled zymotic diseases being given below for comparison.

	1933	1934	1935	1936	1937
Zymotic Death Rate ...	0.14	0.56	0.26	0.08	0.11
<i>Deaths from—</i>					
Smallpox ...	—	—	—	—	—
Enteric Fever ...	—	—	2	—	—
Scarlet Fever ...	1	2	1	—	1
Diphtheria ...	2	12	5	2	—
Measles ...	—	9	—	1	—
Whooping Cough ...	2	1	3	—	3
Diarrhoea (under 2 years)	1	1	1	1	1
	6	25	12	4	5

Cancer.

In Lowestoft during 1937 there were 30 deaths in males and 37 in females ascribed to this cause, making a total of 67. The age and sex distribution of such deaths for the last five years is given below :

Ages	1933		1934		1935		1936		1937	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
10-20	—	—	—	—	—	1	—	—	—	—
20-25	—	—	—	—	—	—	1	—	—	—
25-30	—	—	—	—	—	—	—	—	—	—
30-35	—	—	—	—	—	—	—	1	—	—
35-40	1	1	1	5	—	—	1	—	—	2
40-45	—	2	1	2	—	—	1	2	—	2
45-50	1	1	2	1	2	2	—	2	1	—
50-55	4	6	8	4	2	1	1	5	2	1
55-60	4	5	1	6	5	3	5	5	4	4
60-65	4	3	3	3	5	5	4	6	4	3
65-70	4	6	5	5	8	8	7	5	6	9
70-75	6	3	8	2	8	5	5	6	8	7
75-80	4	4	3	1	1	3	3	3	4	6
80-85	4	3	2	2	1	4	2	2	1	1
85-90	1	2	—	—	2	3	—	3	—	2
90-95	—	—	1	—	—	—	—	—	—	—
95-100	—	—	—	—	—	1	—	—	—	—
Totals	33	36	35	31	34	36	30	40	30	37
	69		66		70		70		67	

Deaths from Tuberculosis.

Tuberculosis was the cause of death in 26 cases finally assigned to the Borough by the Registrar-General. Of these deaths, 21 were from tuberculosis of the respiratory system and 5 were due to other forms of tuberculosis.

The following statement shows the number of deaths assigned to the Borough for this disease during the past five years :—

	1933	1934	1935	1936	1937
Tuberculosis Death Rate	0.80	0.83	0.70	0.82	0.59
Respiratory deaths ...	25	33	27	30	21
Non-respiratory deaths	9	4	8	7	5
	34	37	35	37	26

INFANT MORTALITY

There were 33 deaths of infants under one year of age attributed to the Borough by the Registrar-General, which gives an infant mortality rate of 46.5 per 1,000 live births: the rate for England and Wales was 58 and the rate for the small towns 55.

The following table containing the Registrar-General's figures for the Borough since 1919 is of interest:—

Year	Live Births	Deaths of Infants under 1 year.	Infant Mortality (per 1,000 live births)		
			Lowestoft	England & Wales	Smaller Towns
1919	791	51	64	89	—
1920	1,252	80	63	80	80
1921	1,118	77	68	83	84
1922	980	72	73	77	—
1923	981	54	53	69	69
1924	880	52	61	75	71
1925	785	31	39	75	74
1926	781	56	71	70	67
1927	777	39	50	69	68
1928	717	45	63	65	60
1929	658	30	45	74	69
1930	765	34	44	60	55
1931	698	35	50	66	62
1932	674	39	58	65	58
1933	585	27	46	64	56
1934	649	23	35	59	53
1935	645	22	34	57	55
1936	631	28	44	59	55
1937	709	33	47	58	55

It will be noted that the local infant mortality throughout the last 20 years has observed a decline parallel to that for the country as a whole and has at all times compared favourably both with that for England and Wales and for the small towns of comparable population.

Analysis of certified causes of infant deaths.

The Table on the subsequent page gives a detailed analysis of the ages at death and certified causes of the 33 infants under 1 year dying during the year:—

	Under 1 wk.	1-2 wks.	2-3 wks.	3-4 wks.	Total under 4 wks.	1-3 mths.	3-6 mths.	6-9 mths.	9-12 mths.	Total under 1 year
Prematurity	6	2	1	—	9	1	—	—	—	10
Suffocation	1	—	—	—	1	—	—	—	—	1
Atelectasis	1	—	—	—	1	—	—	—	—	1
Jaundice from Umbilical infection	—	—	1	—	1	—	—	—	—	1
Inanition	1	—	—	—	1	—	—	—	—	1
Congenital Heart Disease	—	—	—	—	—	1	—	—	—	1
Spina Bifida	—	—	—	—	—	1	—	—	—	1
Amyotonia	—	—	—	—	—	—	1	—	—	1
Congenital Duodenal Ileus	—	—	—	—	—	1	—	—	—	1
Congenital Atresia of Ileum	1	—	—	—	1	—	—	—	—	1
Broncho-pneumonia	—	—	—	—	—	1	—	2	2	5
Bronchitis	—	1	—	—	1	1	—	1	—	3
Whooping Cough	—	—	—	—	—	—	—	1	—	1
Convulsions	—	—	—	—	—	—	—	1	—	1
Influenza	—	—	—	1	1	—	—	—	—	1
Meningococcal Meningitis	—	—	—	—	—	—	1	—	—	1
Tubercular Meningitis	—	—	—	—	—	—	—	1	—	1
Gastro-Enteritis	—	—	—	—	—	—	1	—	—	1
	10	3	2	1	16	6	3	6	2	33

It is well established that infant deaths fall into two main groups, one under 4 weeks of age and the other of age 1-12 months, in which widely different causes operate. The first group (the neo-natal deaths) contains those unable to maintain an existence separate from the mother, either by lack of vitality or from congenital defect of body function, together with the accidents and infections to which the new-born are liable. If to this group numbering 16 the 5 cases with congenital defects who just managed to survive four weeks are added, a figure of 21 is obtained against 19 for 1936. When the number of this neo-natal group is considered together with the lowered loss from stillbirths, in the causation of which the same main causes are known to operate, it can reasonably be concluded that the factors favourably influencing maternal welfare and production of healthy children at birth continue to operate with at least undiminished force.

In the second group from 1-12 months an almost identical rate is found as for 1936, any increased mortality found in the respiratory group being offset by a diminution among other causes. The increase from respiratory causes is explainable by a widespread presence of whooping cough in the latter months of the year. An increased respiratory death-rate among infants generally co-exists with the prevalence of whooping cough in an area, and is almost certainly composed of unrecognized cases of whooping cough. In affected children the diagnostic whoop commonly ceases with the onset of broncho-pneumonia or convulsions, and since complications have an early onset in young infected infants death may occur from broncho-pneumonia without any indication of the underlying cause of whooping cough infection.

Stillbirths.

The number of notified stillbirths and the rate per 1,000 total births for each of the last ten years is given in the following table.

	1928	1929	1930	1931	1932	1933	1934	1935	1936	1937
Total Live Births	717	658	765	698	674	585	649	645	631	709
Still Births notified	24	33	26	28	31	21	27	25	29	21
Still Births per 1,000 total Births	32.7	47.8	32.9	38.6	43.9	34.6	39.9	37.3	43.9	28.8

The figure of 21, giving a rate of 28.8 per 1,000 total births, is lower than for any year since the commencement of registration of stillbirths in 1926. Such a rate would point to an increase in factors favourably influencing the general health of the mother. In each stillbirth an enquiry to the attendant doctor or midwife for information as to the probable cause of stillbirth obtained the following :—

Causes ascribed to impaired pre-natal health—

Unhealthy maternal placenta ...	...	...	2
Prematurity ...	...	...	2
Albuminuria or toxæmia of mother ...	...	...	2
Lack of vitality ...	...	...	1
			—
			7

Causes ascribing difficulties at birth—

Prolapse of umbilical cord ...	...	...	2
Prolonged labour ...	...	...	2
Rapid dry labour ...	...	...	1
Knot in umbilical cord ...	...	...	1
Contracted pelvis ...	...	...	1
Malpresentation ...	...	...	1
			—
			8

Causes unknown or information not obtainable ... 6

BIRTH-RATES, DEATH-RATES, ANALYSIS OF MORTALITY MATERNAL DEATH-RATES AND CASE RATES FOR CERTAIN INFECTIOUS DISEASES IN THE YEAR 1937

England and Wales, London, 125 Great Towns, 148 Smaller Towns, and Lowestoft.

(Provisional Figures based on Weekly and Quarterly Returns)

		England and Wales	125 County Boro's and Great Towns including London	148 Smaller Towns (Resident Populations 25,000 to 50,000 at 1931 census	London Admini- strative County
Rates per 1,000 Population					
<i>Births :—</i>					
Live	...	16.0	14.9	14.9	15.3
Still	...	0.47	0.60	0.67	0.64
<i>Deaths :—</i>					
All Causes	...	11.4	12.4	12.5	11.9
Typhoid and Para- typhoid fevers	...	0.00	0.00	0.01	0.00
Smallpox	...	—	—	—	—
Measles	...	0.00	0.02	0.03	0.02
Scarlet Fever	...	0.02	0.01	0.01	0.01
Whooping Cough...	...	0.07	0.04	0.04	0.03
Diphtheria	...	0.00	0.07	0.08	0.05
Influenza	...	0.50	0.45	0.39	0.42
Violence	...	0.32	0.54	0.45	0.42
<i>Notifications :—</i>					
Smallpox	...	0.00	0.00	—	0.00
Scarlet Fever	...	1.58	2.33	2.56	2.42
Diphtheria	...	0.25	1.49	1.81	1.38
Enteric Fever	...	0.25	0.05	0.06	0.04
Erysipelas...	...	0.56	0.37	0.43	0.34
Pneumonia	...	1.04	1.36	1.58	1.20
Rates per 1,000 Live Births					
Deaths under 1 years of age	...	46.54	58	62	55
Deaths from Diarrhoea and Enteritis under 2 years of age	...	1.41	5.8	7.9	3.2
<i>Maternal Mortality :—</i>					
Puerperal Sepsis	...	0.00	0.97	} Not available	
Others	...	1.41	2.26		
Total	...	1.41	3.23		
Rates per 1,000 Total Births (i.e. Live and Still)					
<i>Maternal Mortality— :</i>					
Puerperal Sepsis	...	0.00	0.94	} Not available	
Others	...	1.37	2.17		
Total	...	1.37	3.11		
<i>Notifications :—</i>					
Puerperal fever	...	} 10.96	13.93	17.59	11.52
Puerperal pyrexia	...				
					{ 4.15 14.34

SECTION B.

General Provision of Health Services for the Area

Public Health Staff.

In March Dr. Stuart F. Allison retired from the post of Medical Officer of Health, on assuming the appointment of Medical Officer of Health to the County Borough of Warrington. He was succeeded by Dr. V. R. Walker, who took up duties early in June. Mr. R. P. Long was appointed to the vacant post of Assistant Sanitary Inspector at the beginning of the year, while Mr. L. C. Corlett resigned at the end of November from the post of Assistant Sanitary Inspector on taking up another appointment. Two domiciliary midwives were appointed during the year as part of the local scheme under the Midwives Act, 1936.

(Full particulars of the Public Health Officers of the Authority are incorporated at the beginning of the Report.)

The health service of the Borough continued to discharge all the duties and services of a local sanitary authority, a child welfare authority, and a school medical authority. In addition, the work of a port sanitary authority and of a local supervising authority under the Midwives Acts were carried out. Co-operation continued with those services under the administrative control of the East Suffolk County Council, i.e. Tuberculosis, Venereal Diseases, Mental Welfare under the Mental Deficiency Acts, Secondary School Medical Examination and Treatment, the Care of the Blind and Deaf beyond school age, Public Assistance Medical Service and Vaccination.

Laboratory Facilities.

There was no change during the year in the arrangements for the analysis of food and drugs, chemical and bacteriological reports on water supplies, or the laboratory examination of bacteriological specimens. At the Isolation Hospital Laboratory 174 swabs for diphtheria organisms and 30 specimens of hair for ringworm were examined, together with other minor examinations for the work of that hospital. The following specimens were examined at the Laboratory of the East Suffolk County Council :—

Faeces and Urine for enteric organisms	66
Swabs for diphtheria	54
Widal tests	8
Cerebro-spinal fluid	1
Other specimens	6

Ambulance Facilities.

The arrangements for such were unchanged, and they continue adequate for the area. During the year the St. John's Ambulance Association, which provides transport for accidents and cases of general sickness, replaced their ambulance by a new Vauxhall vehicle. The Health Committee also during the year replaced their infectious diseases ambulance by a new Bedford conveyance, with the additional provision of a light van for the removal of bedding for disinfection or disinfestation and for general sanitary duties.

Nursing in the Home.

The Lowestoft Maternity and District Nursing Association continues to provide home nursing for a nominal fee.

As part of the duty to provide a domiciliary service of midwives placed upon the borough by the Midwives Act, 1936, the local authority entered into an agreement with the Association to employ three full-time midwives for domiciliary midwifery and maternity nursing. The staff of the Association now consists of a matron and 7 nurses, 3 of whom are engaged in full-time maternity work, three are full-time general nurses, and one is part-time a maternity and part-time a general nurse. During the year the following number of visits were paid to all cases by the Association staff:—

To maternity cases	...	...	5,499
To general cases	...	...	12,186

The Maternity and Child Welfare Committee have an agreement with this Association for the nursing of necessitous cases of measles and whooping cough under the age of five years. The Association also pays nursing visits to notified cases of puerperal pyrexia and ophthalmia neonatorum.

Treatment Centres and Clinics.

In November the South Lowestoft Welfare Centre was opened by the Education Committee in Southwell Road. These commodious premises now provide under one roof facilities for school medical examination, minor ailment treatment, infant welfare sessions, dental treatment and antenatal consultation for the whole area of South Lowestoft.

Facilities for the permitted treatment of minor ailments, ear, nose and throat defects, ophthalmic conditions, and for the treatment of dental defects is equally available at the clinics for the pre-school child, though of course less use is made of such than by school children.

Fifty-three expectant mothers received dental treatment on 164 occasions, and 152 dental attendances were made by pre-school children.

The following is a tabulated list of all treatment centres and clinics in the area :—

TREATMENT CENTRES AND CLINICS IN THE BOROUGH

SERVICE	SITUATION	DAYS OPEN
<i>Controlled by the Maternity & Child Welfare Committee</i>		
Infant Welfare Centres	North Lowestoft— Connaught House, 123, High Street.	Wednesdays & Fridays, 2.15 - 4.15 p.m.
	South Lowestoft— Welfare Centre, Southwell Road.	Thursdays, 2.15 - 4.15 p.m.
	Oulton Broad— Council Chambers, Bridge Road.	Mondays 2.15 - 4.15 p.m.
Antenatal Clinics	North Lowestoft— Connaught House	Second and Fourth Tuesdays in each month, 2 - 4 p.m.
	South Lowestoft— Welfare Centre.	First and Third Tuesdays in each month, 2 - 4 p.m.
Consultant Ante-natal Clinic.	Connaught House	Every second Monday in each month 2 - 4 p.m.
<i>Controlled by the Education Committee</i>		
Minor Ailment Treatment Clinics.	*Connaught House,	Each Wednesday, 9-12 a.m. and every other morning from 9-10 a.m.
	*South Lowestoft Welfare Centre	Each school morning, 9-10 a.m.
	*Council Chambers Oulton Broad.	ditto
Dental Clinics	*†Connaught House.	Each afternoon, 2-5 p.m., and alternate Saturday mornings.
	*†South Lowestoft Welfare Centre.	Each morning, 9-12.30 a.m. and alternate Saturday mornings.
Ophthalmic Clinic	*Connaught House.	Each Thursday morning, 9.30-12 a.m.
Ear, Nose and Throat Clinic	*Connaught House.	Every other Tuesday, 2 - 4.30 p.m.
* Also available for pre-school children. † " " " expectant mothers.		
<i>Controlled by the East Suffolk County Council</i>		
Tuberculosis Dispensary.	Crown Street Hall, Lowestoft.	By appointment with the Tuberculosis Officer, County Hall, Ipswich.
Venereal Diseases Treatment Centre	Lowestoft & North Suffolk Hospital.	Women and Children : Tuesdays, 5 - 6 p.m. Fridays, 10.30 to 11.30 a.m. Men : Tuesdays, 6 - 7 p.m. Fridays, 11.30 to 12.30 a.m.
<i>Controlled by the Suffolk Mental Welfare Association</i>		
Occupation Centre for ineducable mentally defective children.	Mariners Score Hall.	Daily morning and after- noon sessions excepting Saturdays.

HOSPITALS: PUBLIC AND VOLUNTARY

Borough Isolation Hospital, Rotterdam Road. This hospital belongs to the Authority, whose Medical Officer acts as Medical Superintendent. The staffing and accommodation has been unchanged during the year, but plans for the provision of a block of twelve single cubicles have now been approved by the Ministry of Health and it is anticipated that the work will be commenced during 1938. Thereafter the conversion of an existing block into domestic staff accommodation will be carried out, together with other minor structural alterations.

These alterations and additions, with the placing of the recently erected temporary block on a semi-permanent basis, will bring the hospital to conform with a scheme submitted by the East Suffolk County Council to the Minister of Health under section 29 of the Local Government Act, 1929. The Ministry finally approved an arrangement for the accommodation at the Lowestoft Borough Isolation Hospital of notifiable infectious diseases from the local sanitary authorities of a very considerable area in the northern section of East Suffolk, and the final scheme commenced operation on the 1st April, 1938.

Voluntary Hospital with which the Local Authority has made arrangements for the admission of patients. The Lowestoft and North Suffolk Hospital continued to provide four maternity beds, exclusive of labour beds, for institutional maternity cases. Forty cases were admitted during the year, of which twenty-two were admitted under the Local Authority's scheme, which accepts responsibility for payment for the maintenance of mothers who are unable to pay the full cost.

OTHER HOSPITALS IN THE AREA.

Lothingland House Infirmary, situate in Oulton just outside the Borough boundary, continues to provide public assistance hospital treatment for the area under the control of the East Suffolk County Council. During the year 1937, 61 cases of destitution were admitted, and one unmarried mother was confined in the maternity ward.

Normanston Hospital for Tuberculosis administered by the East Suffolk County Council provides accommodation for 26 patients, mainly for chronic or advanced cases.

St. Luke's Hospital, Lowestoft, under the control of the London County Council, has 210 beds for the treatment of cases of surgical tuberculosis drawn from the area of that authority.

MIDWIFERY AND MATERNITY SERVICES.

Supervision of Midwives.

The Borough of Lowestoft is the Local Supervising Authority under the Midwives Act. Following the radical changes in domiciliary midwifery service brought about by the 1936 Act the Medical Officer of Health has taken over the duties of Medical Supervisor of Midwives.

During 1937, notice of intention to practise was received from 17 Midwives; of these, eight were on the staff of the District Nursing Associations, one was in hospital practice, one was in Nursing Home practice, and seven were in private practice, of whom one domiciled outside the Borough only practises occasionally within the area.

Birth notifications were received from the following:—

	<i>Midwives'</i> <i>Cases</i>	<i>Maternity</i> <i>Nurses' Cases</i>
Staff of the District Nursing Association	216	111
Staff of the Lowestoft and North Suffolk Hospital	16	24
Private Nursing Homes	—	35
Domiciliary Midwives	168	72
Cases notified by practitioners	—	97

The following notifications were received from Midwives under the rules of the Central Midwives Board:—

(a) <i>Sending for Medical Aid</i>	184
(b) <i>Notifications of deaths—</i>	
<i>Mother</i>	—
<i>Infant</i>	4
(c) <i>Notifications of stillbirths</i>	6
(d) <i>Notification of having laid out a dead body</i>	—
(e) <i>Notification of liability to be a source of infection</i>	6
(f) <i>Notification of artificial feeding</i>	7

Where puerperal pyrexia has occurred in the practice of a midwife, or other contact with a source of infection has occurred, the appropriate action continued to be taken for obtaining other nursing assistance for the case and the disinfection of the midwife's person and outfit. During the year it was not required to suspend any midwife for this or other reason, occasional precautionary disinfection alone being indicated.

Supervision of the practice of midwives was carried out in a spirit of co-operative and helpful surveillance.

Medical Aid.

The following table shows the nature of the emergencies for which medical aid was sought by midwives on 184 occasions:—

*Conditions of Mother.**(a) During Pregnancy*

<i>Albuminuria</i>	...	...	...	9
<i>Miscarriage</i>	...	...	...	8
<i>Pains in legs or varicose conditions</i>				7
<i>Placenta praevia or Antepartum</i>				
<i>haemorrhage</i>	...	...	...	4
<i>Swelling of legs</i>	...	...	...	3
<i>Other conditions</i>	...	...	...	6
				<hr/>
				37
				<hr/>

(b) During Labour.

<i>Torn perineum</i>	...	...	...	49
<i>Delayed or obstructed labour</i>			...	23
<i>Uterine inertia</i>	...	...	...	10
<i>Complicated labour</i>	...	...	...	4
<i>Abnormal presentations</i>	...	...	...	3
<i>Post-partum haemorrhage</i>	...	...	...	3
<i>Twin pregnancy</i>	...	...	...	3
<i>Adherent placenta</i>	...	...	...	2
<i>Collapsed condition</i>	...	...	...	2
<i>Contracted pelvis or disproportion</i>	...	...	...	2
<i>Prolapsed cord</i>	...	...	...	1
<i>Premature labour</i>	...	...	...	1
<i>Oedema of vulva</i>	...	...	...	1
				<hr/>
				104
				<hr/>

(c) During Lying-in Period.

<i>Rise of temperature</i>	...	...	...	7
<i>Inflamed breast</i>	...	...	...	3
<i>Debility</i>	...	...	...	1
<i>Inflammation of face</i>	...	...	...	1
				<hr/>
				12
				<hr/>

Conditions of the Child.

<i>Discharging eyes</i>	...	...	...	13
<i>Birth deformities</i>	...	...	...	7
<i>Convulsions</i>	...	...	...	2
<i>Abdominal distension</i>	...	...	...	2
<i>Dangerous feebleness</i>	...	...	...	2
<i>Death of baby</i>	...	...	...	1
<i>Other conditions</i>	...	...	...	4
				<hr/>
				31
				<hr/>

Costs of Provision of Medical Aid.

Under the Midwives Act, 1918, the Local Authority is responsible for the payment of fees to doctors who may be summoned in cases of any emergency by midwives to give medical aid ; and the Authority has power to recover all, or part, of the cost from the patients, except in necessitous cases when the cost is remitted.

During the year fees paid to private doctors amounted to £329 13s. 6d. The insurance scheme continued in force by which expectant mothers paid to the Authority the sum of 5s., and in return were absolved from any liability for the recovery of fees paid to medical practitioners called in under Section 14 of the Midwives Act, 1918. The amount of such premiums received during the year was £28 8s. 6d., while a further sum of £62 12s. 0d. was recovered towards the sums paid for medical aid.

MIDWIVES ACT, 1936.

By the above Act the Local Supervising Authority was charged with the duty of preparing a scheme for the provision of a domiciliary service of midwives for midwifery and maternity nursing under the control of the Local Authority 'adequate for the needs of the area'.

The local scheme was formulated after consultation with all voluntary associations employing domiciliary midwives in the area and with the local organizations representative of practising medical practitioners and midwives. The final scheme for the Borough submitted to the Ministry provided, subject to agreements, for the utilization of the services of the two local district nursing associations. The Lowestoft District Nursing Association agreed to provide the services of three full-time midwives and the Oulton Nursing Association the services of one part-time midwife, at agreed salaries and scale of fees. The scheme further provided for the appointment of three whole-time municipal midwives by the Corporation.

As only one certificate was voluntarily surrendered early in the year, by a midwife in the employ of a voluntary organization, it became obvious that considerable private midwifery practice would continue in the Borough, which would not be likely to diminish greatly for some time. Therefore the Maternity and Child Welfare Committee proceeded only to the appointment of two full-time municipal midwives, holding one in reserve until the demand for such services should justify the third midwife being appointed. At the same time the Committee had to provide for a certain increase in demand when an order should be made and become operative for the area under Section 6 (1) of the Midwives Act, 1936.

The scheme for a domiciliary service came into operation in Lowestoft on the 30th July, 1937. One municipal midwife was appointed to commence duty on that date, the second appointment being made on the 11th October, 1937, while the agreements with the voluntary associations commenced on the first date. The Ministry has since been satisfied that an adequate domiciliary service has been provided, and the Borough of Lowestoft (Prohibition of Unqualified Persons) Order has come into force from the 1st April, 1938, prohibiting unqualified persons acting as maternity nurses for gain.

Since July 30th to December 31st the following cases have been attended by midwives coming under the scheme :—

	<i>As Midwives</i>	<i>As Maternity Nurses</i>
Municipal Midwives	34	2
Lowestoft District Nursing Association	93	55
Oulton District Nursing Association	1	5

The scheme has attempted to be fair to all interests, and to embarrass as little as possible those midwives who wish to continue in private practice. The latter however had been working under adverse conditions even before the passing of the Act, and it is generally anticipated that as the present private midwives gradually cease to practise through retiral, more and more use will be made of the local authority's service for midwifery and maternity nursing by the working-classes. Both the municipal midwives appointed were previously in private practice in the area. The Council has undertaken to proceed to the appointment of a third midwife if and when calls for such services exceed a fair amount of work for two midwives.

Since its inception the scheme has worked fairly smoothly and a fairly free choice is permitted by the arrangements, which, however, will probably lessen if, as is probable, private midwifery practice diminishes. The objects of the Act were "to secure an adequate domiciliary service of salaried midwives as an important step in the improvement of the maternity services, to raise the whole status of the midwifery profession by providing adequate salaries and secure prospects, and to compensate those midwives retiring within a specified period, so reducing overcrowding in the ranks of the profession". Such objects have been kept in view by the Authority, and it can reasonably be expected that after some time of operation much of these aims will be achieved. Whilst endeavouring to achieve more effective co-ordination between private doctors, hospitals and practising midwives, the Local Authority representing the community requires to keep the best interests of the individual expectant mother to the forefront. While every effort should be made to prevent confinement in unsuitable homes, or in suitable homes when institutional treatment is necessary, it is essential to reassure the public as to the advantages and safety of domiciliary confinement under normal circumstances. For such the service of a well-trained, self-reliant and competent midwife is the first essential, to which all other provisions are merely accessory.

Hospital Lying-in Accommodation.

The Local Authority continues to accept responsibility for payment of maintenance in the maternity beds of the Lowestoft and North Suffolk Hospital on behalf of mothers who are unable

to meet the full cost of such in-patient treatment. Cases are recommended for such admission because of probable complications or owing to unsuitable home conditions. In addition, certain cases admitted in emergency owing to unforeseen complications also come under the scheme.

Each case is investigated by the Borough Treasurer's department to recover the whole or part of the cost according to family circumstances. During the year 1937 the Local Authority paid £146 9s. 6d. to the Hospital in respect of maternity cases, and the sum of £36 18s. was recovered from patients.

Home Helps in domiciliary confinements continue in certain necessitous cases to be provided. Twenty-seven applications were granted by the Maternity and Child Welfare Committee during the year, in twenty-three of which the full payments were made by the Local Authority, while in the other four cases part payment was made by the parent.

Ante-Natal and Post-Natal Clinics.

This combined service continued to be afforded weekly each Tuesday at Connaught House during the year, but with the opening of the South Lowestoft Welfare Centre this service is now afforded alternate weeks at Connaught House and Southwell Road. Expectant mothers can also receive advice but not usually examination at any infant welfare session. The following is a summary of the attendances made :—

(a) Total attendances made by expectant mothers	...	772
(b) Average attendance of expectant mothers per session	... ..	15.4
(c) Total number of expectant mothers who attended during the year	... ..	232
(d) Percentage of total notified births and stillbirths represented by the number (c)	... ..	32.0

All abnormal findings at the ante-natal clinic are communicated to the person who will attend at the confinement.

A monthly consultant ante-natal clinic was commenced in January, 1937, where ante-natal or post-natal cases might have expert opinion in case of existing or suspected complications. During the year Mr. M. Bulman saw 104 women, who made 136 attendances at eleven sessions of this clinic, including certain cases referred to him by private medical practitioners. Advantage of such facilities was not taken by the latter as frequently as was hoped at the inception of the clinic.

Consultant Obstetrician.

The services of Mr. Michael Bulman continued to be available during the year for calling out by any private medical practitioner for consultation in obstetric complications. On no occasion during this year however was application made for such services within the area of the Borough.

Maternal Mortality.

Two maternal deaths occurred during the year, one of which was a case belonging to the County area who had been admitted for treatment to an institution in the Borough. One maternal death, therefore, is credited to the Borough, which for 709 total live births gives a low maternal mortality rate. In a small area like the Borough of Lowestoft this rate must vary greatly from year to year, but over a recorded period of 10 to 15 years the average mortality for the area has been low relative to the rate for England and Wales.

Infant Welfare Centres.

In November the Kirkley Centre was transferred to the newly-opened Southwell Road Welfare Centre. There the more commodious premises caused an immediate increase in the number of mothers bringing their infants. The increased popularity shows convincingly the importance of the provision of attractive premises to secure the co-operation of mothers. The work at the centres can be summarized as follows:—

	<i>Total</i>	<i>Children</i>	<i>Children</i>	<i>First</i>
	<i>Attendances</i>	<i>Under 1</i>	<i>1—5</i>	<i>Attendances</i>
Connaught House	3232	133	302	259
Kirkley or Southwell				
Road ...	1828	65	117	106
Oulton Broad ...	1654	28	113	71
	<hr/> 6714	<hr/> 226	<hr/> 532	<hr/> 436

In September of the year it was found advisable to provide a second infant welfare session at Connaught House on account of pressure on Friday afternoons.

The work of the infant welfare sessions continues to be concentrated on education and guidance in the nurture and hygiene of the child. Practically no medicaments are dispensed other than accessory foods and nutritional aids. Advice is also given in many physiological deviations from normal health falling short of actual disease, while definite illness other than minor ailments or dental defects continue to be referred to the private medical attendant.

Acknowledgment.

The Maternity and Child Welfare Service continues to owe a large debt for the willing assistance of the voluntary workers who so regularly attend at each infant welfare centre, without whose assistance it would not be possible to give attention to the numbers of mothers and children attending the afternoon sessions.

Provision of Milk in Necessitous Cases.

Following the receipt of the Ministry of Health Circular 1519, the Maternity and Child Welfare Committee accepted the request to review its arrangements to ensure that such provision in necessitous cases was always adequate. It was found that certain voluntary funds upon which considerable reliance had been placed in the past for such provision were almost exhausted and there was an increasing reluctance by the Public Assistance Authorities to make special nutritional grants to expectant mothers and young children, which under various Maternity and Child Welfare Orders have tended to become the sole liability of the Maternity and Child Welfare Authority. The committee finally approved a fairly wide scheme following the suggestions of the circular, and an income scale determining necessity equivalent to the recently revised County Council scale.

During the year 233 necessitous cases received milk free of charge, the total amount supplied being 1,331 $\frac{3}{4}$ gallons and 120 lb. of dried milk at an approximate cost of £148 16s. Certain other foods and nutritional aids were distributed free to necessitous cases.

Work of Health Visitors.

Five health visitors continued to be employed during the whole year, half of whose services are devoted to school medical work. In addition to staffing the ante-natal clinic and infant welfare sessions the following visits were paid during the year in connection with maternity and child welfare work in their respective districts:—

To expectant mothers	(1) First visits	252	(2) Total Visits	417
To children under 1				
year of age	... (1) First visits	715	(2) Total visits	4888
To children between the				
ages of 1 and 5 years.			Total visits	7033
				<hr/>
			Total visits	... 12,338
				<hr/>
Total Attendances at Welfare Sessions	...	...	...	217

Infant Life Protection (under Part I of the Children Act, 1908, as amended by the Children and Young Persons Act, 1932).

The Borough of Lowestoft as Maternity and Child Welfare Authority administers these Acts, which provide for the supervision of all children under 9 years of age who are placed as foster children for reward apart from their parents.

Each of the Health Visitors continues as authorized home visitor for her particular area. At the end of the year twenty-six persons were on the register as receiving children for reward, thirty-two children being under their care. Such children are visited more frequently than ordinary children in the area and 222 visits were paid during 1937. No legal proceedings were taken in any case during the year.

Orthopaedics.

Infant welfare cases requiring such treatment are referred either to the private practitioner or the out-patient department of the Lowestoft and North Suffolk Hospital, where a consultant orthopaedic surgeon attends twice monthly. The committee has recently become represented on the newly-formed Suffolk Association for Cripples Welfare, and it is to be hoped that both school children and pre-school children in Lowestoft requiring treatment will have full access to any complete orthopaedic scheme which may be formed in the County area.

Institutional Provision for Mothers or Children.

There is no institutional provision by the local authority for mothers or children other than that described under Maternity Services.

Registration and Supervision of Nursing Homes.

The Borough of Lowestoft is the local supervising authority for the registration of nursing homes, and the Medical Officer of Health is the inspecting officer. All such registered homes were visited during the year and found satisfactory. A friendly relationship exists with such premises, and any potential liability to be a source of infection is usually quickly referred to the Health Department for guidance and any requisite action.

Nursing Homes Registration Act, 1927.

The following table gives the details of registration during the year :—

(i)	Number of applications for registration during 1937	...	—
(ii)	Number of Homes registered	... ..	4
(iii)	Number of Orders made refusing or cancelling registration	...	—
(iv)	Number of Appeals against such Orders	... ..	—
(v)	Number of cases in which such Orders have been—		
	(a) Confirmed on appeal	... ..	—
	(b) disallowed	... ..	—
(vi)	Number of applications for exemption from registration	...	2
(vii)	Number of cases in which exemption has been—		
	(a) granted	... ..	2
	(b) withdrawn	... ..	—
	(c) refused	... ..	—

SECTION C

Sanitary Circumstances of the Area

I.—WATER

The public supply from the Lowestoft Water and Gas Undertaking has been uniformly satisfactory during the year, both as regards quality and quantity. The average daily consumption equals 1,230,000 gallons, which is approximately 28 gallons per head per day.

The supply is derived from open lakes at Lound, whose source is shallow springs plus a certain amount of surface water from a limited catchment area together with river water from the upper reaches of the Bure obtained from the Yarmouth undertaking. The water is subject to the natural purifying action of storage, then passes through a system of rapid filters, after which it is subjected to slow sand filtration. The whole supply is finally chlorinated by an up-to-date automatic plant. Every reasonable precaution is taken to protect the lakes and catchment area. Each month regular samples of the water are submitted by the Water Undertaking for chemical and bacteriological analysis by two independent analysts, whose reports are always available to the health department. Samples are also taken by the sanitary department for full confirmatory chemical and bacteriological reports at intervals, now fixed quarterly, at the instance of the local authority. A summary of the reports on these samples follows :—

The Chemical Results are stated in parts per 100,000

<i>Chemical</i>	<i>Jan.</i>	<i>Feb.</i>	<i>Mar.</i>	<i>Aug.</i>	<i>Nov.</i>
Total Solids ...	38.0	35.0	34.0	33.0	43.0
Ammonia Saline ...	0.0144	0.0070	0.0144	0.0012	0.0100
Ammonia Albuminoid	0.0126	0.0120	0.0106	0.0102	0.0108
Chlorine ...	7.20	5.80	5.10	5.40	6.10
Nitrates ...	0.30	0.26	0.30	0.20	0.32
Nitrites ...	trace	trace	nil	trace	trace
Oxygen absorbed in 4 hrs. at 27° C. ...	0.116	0.150	0.138	0.103	0.143
Hardness (temporary)	13.0	12.5	12.0	15.0	15.5
Hardness (permanent)	7.5	7.0	6.8	5.0	7.5
Hardness (total) ...	20.5	19.5	18.8	20.0	23.0

Bacteriological.

Average No. of organisms producing visible colonies on gelatine 'plates' incubated at 20-22°C. for 3 days ...	8 per c.c.	16 per c.c.	6 per c.c.	50 per c.c.	18 per c.c.
Ditto on agar plates at 37.5°C. for 2 days ...	3 per c.c.	4 per c.c.	less than 1 per c.c.	14 per c.c.	8 per c.c.

B. Coli not found in 100 c.c. in any analysis.
Streptococci not found in 30 c.c. in any analysis.

The figures correspond closely with the reports made available by the Water Undertaking, and confirm that the supply is at all times pure and wholesome.

There were no new sources of public water supply during the year and no important extension of mains.

Two samples of water from wells in the South part of the Borough were taken during the year. Neither proved to be entirely satisfactory. Shallow wells in this area have shown intermittent pollution and every effort is made to have the public supply laid on when possible.

II.—DRAINAGE AND SEWERAGE

No important extension of sewerage or of the sewage disposal system was made during the year.

III.—RIVERS AND STREAMS

Strict supervision is exercised in order to minimize pollution of rivers and streams in the area.

IV.—CLOSET ACCOMMODATION

Little remains of the original programme of privy conversion in the Oulton Broad area. Building operations on land beyond the present sewerage system tends however to increase the number of cesspools and septic tanks.

The following table indicates the conversions which have taken place during the period 1921—1937 :—

Year	Sinks Prov'd	Privies or pails Abolished	New W.C.'s Prov'd	Houses con- nected to Sewer	Gulleys Prov'd	Chambers Built	Vent Pipes	Cesspools Ab'lsd
1921	8	20	20	3	21	12	14	6
1922	12	21	21	8	20	15	16	2
1923	22	131	134	150	150	78	64	45
1924	23	130	139	157	139	167	127	91
1925	78	259	284	294	251	263	190	118
1926	41	126	126	134	135	133	101	42
1927	21	46	49	47	47	30	24	6
1928	7	12	12	20	18	25	20	10
1929	50	83	86	85	84	28	16	17
1930	9	19	7	33	20	27	21	17
1931	1	27	22	25	20	16	6	11
1932	2	5	3	20	8	37	18	16
1933	1	—	1	1	1	2	—	1
1934	2	2	8	10	8	19	9	9
1935	2	27	27	30	27	19	6	7
1936	1	—	1	5	4	9	1	4
1937	1	3	7	11	13	24	6	10
Total	281	911	947	1126	966	904	639	412

V.—PUBLIC CLEANSING

(a) *Scavenging*.—This work is carried out by the Borough Surveyor's Department. Cleanliness of the streets and prompt removal of house refuse play no small part in the making of a sanitary town

(b) *Refuse Removal and Disposal*.—Galvanized covered ashbins are used for the reception of house refuse throughout the Borough. Forty-seven of these were provided through the action of the sanitary inspectors during the year.

House refuse is removed weekly or more often when necessary, as in the case of the large hotels during the season. The contents of the few remaining earth closets and privies are removed at night. A mechanical vacuum tank is used for emptying all cesspools for which the Corporation have undertaken the responsibility. Frequency of emptying varies in different cases.

S. W. Mobbs, Esq., the Borough Surveyor, reports for 1937 :—

Tons of refuse removed	...	...	...	22,126
Tons of refuse destroyed by destructor	...	...	...	9,080
Tons of refuse tipped	...	...	...	13,046

From these figures it will be seen that a great part of the town's refuse is tipped. A sandy pit about a mile from the town is used for this purpose.

VI.—SANITARY INSPECTION OF THE AREA

This work was carried on as usual by the Sanitary Inspectors, who made 10,816 inspections of various kinds during the year as detailed below.

The following table shows the number of the various visits made :—

Ice-cream premises and barrows	...	...	...	133
Food and Drugs (Adulteration) Act, 1928	...	...	...	286
Milk and Dairies (Consolidation) Act, 1915	...	...	...	17
(Animal Inoculation Samples)	...	...	...	24
Water Samples	...	...	...	64
Verminous and Dirty Houses	...	...	...	20
Places of Entertainments	...	...	...	—
Hackney Car Inspection	...	...	...	8
Privy Conversions	...	...	...	34
Fruit Shops	...	...	...	190
Butchers' Shops	...	...	...	93
Provision Shops	...	...	...	—
T.B. Order, 1925 (Slaughter of Animals)	...	...	...	135
Dairies	...	...	...	24
Cowsheds	...	...	...	286
Drains Inspected	...	...	...	99
Drains Tested	...	...	...

Common Lodging Houses	...	...	...	64
Private Slaughterhouses	...	...	...	2,750
Bakehouses	...	...	...	84
Stables	...	...	...	6
Vans and Tents	...	...	...	14
Housing Inspection (Public Health Act)	...	...	...	171
Housing Acts, 1936	...	...	...	775
Overcrowded Houses	...	...	...	18
L.N.E.R. Station	...	...	...	250
Factories and Workshops	...	...	...	98
Offensive Trades—				
1. Fried Fish Shops	...	...	...	167
2. Marine Stores	...	...	...	19
3. Gut Scrapers	...	...	...	10
Docks	...	...	...	624
Petroleum Acts	...	...	...	241
Markets	...	...	...	153
Rats and Mice (Destruction) Act (Urban District)	...	...	...	95
Zymotic Inquiries	...	...	...	188
Interviews	...	...	...	646
Premises where food is prepared	...	...	...	212
Fish Markets	...	...	...	462
Complaint Inquiries	...	...	...	413
Pickling Plots and Fish Yards	...	...	...	99
Smoke Observations	...	...	...	13
Re-visits	...	...	...	943
Miscellaneous visits	...	...	...	131
Disinfections	...	...	...	42
Graded Milk Samples	...	...	...	16
Shops Acts	...	...	...	667
Piggeries	...	...	...	10
Public Conveniences	...	...	...	6
Informal Milk Samples	...	...	...	12
Court Attendances	...	...	...	4
				<hr/>
				10,816
				<hr/>

Defects Found and Notices Served to Remedy.

In the course of the year 961 defects were discovered as a result of these inspections. 245 informal notices were served.

The Statutory Notices served, with resultant action obtained are indicated in the table below :—

Act and Section	No. of Notices.	Complied with.	Out-standing.
<i>Public Health Act, 1875</i>			
Section 91	27	27	—
<i>Public Health (Amendment) Act, 1907</i>			
Section 25	1	1	—
Section 49	3	3	—
<i>Public Health Act, 1925</i>			
Section 20	8	8	—
<i>Public Health Act, 1936</i>			
Section 39	6	2	4
Section 44	2	2	—
Section 45	1	1	—
Section 75	1	—	1
<i>Lowestoft Corporation Act, 1934</i>			
Section 69	4	4	—
Section 84	13	13	—
<i>Housing Act, 1936</i>			
Section 9	40	29	11
	106	90	16

The following table gives in detail the work carried out as a result of the above notices :—

Houses.

Dampness abated	...	...	...	137
Coppers or stoves repaired or renewed	...	...	...	50
Roofs repaired	...	...	...	22
Chimneys repaired	...	...	...	18
Walls repaired	...	...	...	87
Roof gutters and down spouts repaired	...	...	...	16
New galvanized iron dust tins provided	...	...	...	47
Ceilings repaired	...	...	...	27
Floors repaired	...	...	...	63

Yard paving repaired	...	...	...	23
Window sash cords repaired	...	...	...	32
Doors repaired	...	...	...	10
Sink waste pipes provided	...	...	...	13
Window frames repaired	...	...	...	51
Staircases repaired	...	...	...	4
New sinks provided	...	...	...	32
Separate water supply provided	...	...	...	—
Houses disinfested	...	...	...	19
Food stores provided	...	...	...	15
Wash-houses provided	...	...	...	2
Premises cleansed	...	...	...	5

Water Closets.

New w.c. pans provided	...	...	...	25
Walls repaired	...	...	...	9
Defective flushing cisterns repaired or renewed	...	...	...	22
W.C. seats provided	...	...	...	27
W.C. doors repaired	...	...	...	4
Ceilings repaired	...	...	...	1
Floors repaired	...	...	...	1
Roofs repaired	...	...	...	4

Drainage.

Drains unstopped and cleansed	...	...	...	47
Drains repaired or relaid	...	...	...	46
Gulleys provided	...	...	...	23
Chambers built	...	...	...	25
Vent shafts provided or repaired	...	...	...	4
Cesspools abolished	...	...	...	—
Inspection chamber covers repaired	...	...	...	6
Stoppers to raking arm of interceptor provided	...	...	...	9
Interceptors provided	...	...	...	10
Septic tanks provided or repaired	...	...	...	2

Miscellaneous.

Wells repaired	...	...	...	2
Accumulation of manure removed	...	...	...	3
Accumulation of refuse removed	...	...	...	10
Watercourses cleansed	...	...	...	4

Factories and Workshops.

Cleansed	4
----------	-----	-----	-----	---

VII.—SHOPS ACTS

The Chief Sanitary Inspector is responsible for the inspection of shops under the Acts of 1912-1936. During the course of the year a total of 667 visits were made. Attention was paid to the question of ventilation, temperature and the sufficiency of sanitary conveniences provided. No legal action was required in respect of these provisions.

VIII.—SMOKE ABATEMENT

The Town Council have not adopted Bye-laws under the Public Health (Smoke Abatement) Act, 1926, but the following resolution of the Public Health Committee was confirmed by the Council:—
“That the emission of black smoke from the chimneys of factories for a period of more than three consecutive minutes or a total of five minutes in any continuous period of thirty minutes be considered as a nuisance to be dealt with by the Council under the provision of Section 91 of the Public Health Act, 1875.”

Seven observations were taken during the year.

In the event of a nuisance occurring according to the terms of the resolution previously set out, the Manager of the firm and the furnace-men were invariably interviewed. I think it may be stated that these steps have again had a satisfactory result.

IX.—SWIMMING BATHS AND POOLS

The two publicly owned swimming baths in the Borough (1) North Denes (sea water), and (2) Oulton Broad (fresh water) were kept under supervision. The water in both baths is subject to chlorination. During the peak months of July and August samples were taken from each. The bacteriological reports on the first named were very satisfactory and came well within the accepted standards of purity for bath water. Those on the second named were not so satisfactory and the attention of the appropriate department was drawn to the reports, together with the submission of suggestions by which improvement might be effected.

There are no privately owned swimming baths in the Borough.

X.—ERADICATION OF BED BUGS

In this connection 12 houses were dealt with during the year, 4 belonging to the Council and 8 to private owners.

An efficient non-cyanide proprietary disinfesting preparation was used in each case and the work carried out by the staff of the Department.

No action was necessary with regard to the belongings of tenants before removal to Council houses.

XI.—SCHOOLS

The sanitary conditions and water supply of schools in the area continue sufficient and satisfactory, and are improved when occasion warrants.

A full report on school hygiene is found in the report of the School Medical Officer who is also Medical Officer of Health.

It was not found necessary to close any of the schools during the year on account of the prevalence of infectious disease.

PREMISES AND OCCUPATIONS WHICH CAN BE CONTROLLED BY BYE-LAWS OR REGULATIONS

Common Lodging Houses.—There are two registered common lodging houses in the Borough, both of which provide accommodation for men only.

There are no common lodging houses registered for women.

These premises are kept under strict supervision, the sanitary inspectors making 64 visits during the year.

Houses Let in Lodgings.—There are no bye-laws for the orderly and sanitary regulation of this class of dwelling. Large houses in the neighbourhoods which have deteriorated tend to become let as tenements when their former more prosperous occupiers have deserted them for the smaller modern dwelling. Frequently they are occupied by the more irresponsible type of tenant. Bye-laws for regulating the conditions in such property would be of help to the sanitary staff.

Underground Dwellings and Sleeping Rooms.—Many of the houses in Lowestoft have basement kitchens, etc., and owing to the overcrowding and the amount of sub-letting at present in vogue the conditions in all cases are not quite satisfactory. This is a difficult matter to control owing to rapid changes in the population due to the presence of temporary residents, especially during the summer months.

Tents and Vans.—Bye-laws dealing with these and similar habitations came into force towards the end of 1926 and have proved most useful in dealing with nuisances arising from these structures.

During the year 14 inspections were made and no contraventions of the bye-laws were found.

Offensive Trades.—There are three offensive trades carried on in the Borough and these involve 61 premises. Of these 52 are occupied by fish fryers, 8 by marine store dealers and one by a gut scraper.

Inspections were made of these premises to the number of 196 in the course of the year. On the whole, they are clean and well kept, and any nuisance arising is reduced to a minimum.

Slaughterhouses and Bakehouses.—Reference to these will be found in the section dealing with the inspection of food supplies.

REPORT ON THE ADMINISTRATION OF THE FACTORY AND WORK-
SHOP ACT, 1901,

in connection with

FACTORIES, WORKSHOPS AND WORKPLACES

TABLE A.—INSPECTION OF FACTORIES, WORK-
SHOPS AND WORKPLACES

Including Inspections made by Sanitary Inspectors.

Premises 1	Number of		
	Inspections 2	Written Notices 3	Prosecutions 4
Factories (Including Factory Laundries)	18	2	—
Workshops (Including Workshop Laundries)	80	1	—
Workplaces (Other than Outworkers' Premises)	99	—	—
Total	197	3	—

TABLE B.—DEFECTS FOUND IN FACTORIES,
WORKSHOPS AND WORKPLACES

Particulars 1	Number of Defects			Number of Prosecu- tions 5
	Found 3	Remedied 3	Referred to H.M. Inspector 4	
<i>Nuisances under the Public Health Acts—*</i>				
Want of cleanliness	6	6	—	—
Defective Drains	4	4	—	—
Other nuisances	5	5	—	—
Sanitary accommodation {	Insufficient ...	3	3	—
	Unsuitable or defective	1	1	—
	Not separate for sexes	1	1	—
	Absence of ...	—	—	—
	Unscreened ...	—	—	—
<i>Offences under the Factory and Workshop Acts—</i>				
Illegal occupation of Underground Bake- house (s. 101)	—	—	—	—
Other offences	—	—	—	—
(Excluding offences relating to Out- work and offences under the Sections mentioned in the Schedule to the Min- istry of Health (Factories & Work- shops Transfer of Power Order, 1921)	—	—	—	—
Total	20	20	—	—

*Including those specified in sections 2, 3, 7 and 8 of the Factory and Work-
shop Act, 1901, as remediable under the Public Health Acts,

There are 385 workshops and workplaces on the register. In addition there are also 14 factory bakehouses.

Only two lists of outworkers were received during the year giving particulars of one contractor employing two men.

OTHER MATTERS

Class (1)	Number (2)
Matters notified to H. M. Inspector of Factories ...	—
Failure to affix abstract of the Factory and Workshop Acts (s. 133, 1901) ...	—
Action taken in matters referred by H. M. Inspector as remediable under the Public Health Acts, but not under the Factory Acts (s. 5, 1901) ...	—
Notified by H. M. Inspector ...	6
Reports (of action taken) sent to H. M. Inspector ...	6
Other ...	—
Underground Bakehouses (s. 101) in use at the end of the year	1

SECTION D.

HOUSING

The following Table shows the number of dwellings occupied and unoccupied at the time of the Census 1931, and those which have been built and occupied from June, 1931 to December, 1937 :—

Census, 1931					Dwellings added and occupied from June, 1931 to December, 1937		
Ward	Structurally separate dwellings occupied	Vacant unfurnished dwellings	Dwellings with more than one occupier	Total dwellings occupied and vacant	By private builders	By Local Authority Parlour type	Authority Non-Parlour type
North	2181	—	—	—	199	—	—
South	2558	—	—	—	673	—	108
East	1878	—	—	—	112	—	—
West	1808	—	—	—	88	—	33
Oulton Broad	1125	—	—	—	490	—	14
Total	9550	145	881	9870	1562	—	155

The number of new houses erected during the year was as follows :—

Total	...	...	...	...	...	...	183
(i) By the Local Authority	...	...	...	...	...	...	9
(ii) By other Local Authorities	...	...	...	...	...	...	—
(iii) By other bodies and persons	...	...	...	...	...	...	174

The following tabular statement supplies the information required by direction of Ministry of Health Circular 1650 :—

1.—*Inspection of Dwelling-houses during the year.*

(1)	(a)	Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts) ...	298
	(b)	Number of inspections made for the purpose ...	946
(2)	(a)	Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 ...	13
	(b)	Number of Inspections made for the purpose ...	36
(3)		Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation ...	6

(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-head found not to be in all respects reasonably fit for human habitation)	292
2.— <i>Remedy of Defects during the Year without Service of Formal Notices.</i>	
Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers	252
3.— <i>Action under Statutory Powers during the Year.</i>	
(a) Proceedings under sections 9, 10 and 16 of the Housing Act, 1936 :—	
(1) Number of dwelling-houses in respect of which notices were served requiring repairs	40
(2) Number of dwelling-houses which were rendered fit after service of formal notices :—	
(a) By owners	29
(b) By Local Authority in default of owners	—
(b) Proceedings under Public Health Acts :—	
(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	66
(2) Number of dwelling-houses in which defects were remedied after service of formal notices :—	
(a) By owners	60
(b) By Local Authority in default of owners	1
(c) Proceedings under sections 11 and 13 of the Housing Act, 1936 :—	
(1) Number of dwelling-houses in respect of which Demolition Orders were made	4
(2) Number of dwelling-houses demolished in pursuance of Demolition Orders	—
(d) Proceedings under section 12 of Housing Act, 1936 :—	
(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made	2
(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit	—
4.— <i>Housing Act, 1936, Part IV—Overcrowding.</i>	
(a) (i) Number of dwellings overcrowded at the end of the year	91
(ii) Number of families dwelling therein	93
(iii) Number of persons dwelling therein	712

(b)	Number of new cases of overcrowding reported during the year	...	...	...	30
* (c)	(i)	Number of cases of overcrowding relieved during the year	...	...	49
	(ii)	Number of persons concerned in such cases			402

**The overcrowding relieved under Item (c) was due in 26 Cases to the number of occupants being reduced by reason of deaths, marriages or the leaving of individual members of the family ; 5 other families have found other accommodation suitable to their number of occupants and the remaining 18 families have removed and their present whereabouts are unknown.*

(d)	Particulars of any such cases in which dwelling-houses have again become overcrowded after the Local Authority have taken steps for the abatement of overcrowding	...	...	None
(e)	Any other particulars with respect to overcrowding conditions upon which the Medical Officer of Health may consider it desirable to report.			

The following report, on the position as regards overcrowding existing in the Borough at the end of the year was submitted by the Medical Officer of Health to the Health Committee of the Council on 28th December, 1937 :—

“ It will be remembered that the Survey carried out under the provisions of the Housing Act, 1935, during the first three months of the year 1936, showed a total of 110 overcrowded houses in the Borough.

“ As considerable time has elapsed since this report was made, I deemed it advisable to make some further enquiry with reference only to those houses originally found to be overcrowded in addition to a number which have come to the notice of this department since the report was made.

“ Investigation has been made into a total of 140 overcrowded houses and it was found that considerable changes had resulted as will be seen from the following statement :—

Position at Survey	...	110			
Number found since	...	30			
		—	...	...	140
Number relieved by removal, deaths, marriages, etc.	...	...	...	...	49
					—
	Remaining	...	...		91
					—

“ In 26 cases the number of occupants has been reduced by reason of deaths, marriages or the leaving of individual members of the family. In 23 cases, 5 of the families concerned have found

other accommodation suitable to their number of occupants, there remains a further 18 families who have removed and their present whereabouts unknown. It would not be safe to assume that they have been successful in obtaining suitable accommodation, and this number must remain problematical. No doubt further instances of overcrowding will continue to be found by the Sanitary Inspectors in the course of their duties from these and other movements of families since the survey.

"Of the remaining 91, eleven families are in houses situate in Clearance Areas or the Redevelopment Area and it is anticipated that accommodation will be found for these people according to the rehousing proposals in connection with the Slum Clearance Scheme, while in two instances the overcrowding is due to sub-tenants.

"Disregarding for the time being the unknown quantity arising by reason of the removal of tenants whose present whereabouts are unknown, there remains 78 overcrowded families of the following sizes :—

		2 families of	3 persons	
32	{	4	" "	4 "
		8	" "	5 "
		5	" "	6 "
		13	" "	7 "
46	{	14	" "	8 "
		7	" "	9 "
		15	" "	10 "
		6	" "	11 "
		2	" "	12 "
		2	" "	13 "

"Drawing a line as set out above it may be assumed that no accommodation is available for the families with occupants varying from 8 to 13 persons owing to their financial circumstances, and it will be necessary for the Council to provide for these people. The remaining 32 may or may not find accommodation in the houses vacated when alternative accommodation has been provided.

"It will be seen that unless the Council take the necessary steps to provide houses, nothing can be done with regard to the future regulation of overcrowding under the provisions laid down by the Housing Act, 1936.

"The known necessity remains practically the same, i.e. 46 houses as against the estimated number of 49 when the proposals of the Local Authority were submitted to the Ministry of Health on 1st August, 1936."

CLEARANCE AREAS

Four Clearance Areas, represented during 1936, were subsequently confirmed early in the year 1937.

The following table is a complete record of the Housing Programme carried out since the adoption of the revised programme in October, 1933 up to the end of 1937 :—

Order No.	Premises.	No. of Houses	Persons to be displaced	Date Represented	Date of Confirmation	Result
2	Greys Cottage and No. 3 Coleman Sq. 40 and 42, Whapload Road	4	4	28/5/34	30/3/35	Demolished June, 1935.
3	1 and 2 Maltster's Score	2	14	28/5/34	30/3/35	Demolished September, 1936.
4	32-38, Anguish Street	5	23	3/9/34	1/4/35	Demolished May, 1936.
5	51, 53 and 55 Pakefield Street	3	12	26/2/35	2/9/35	Demolished May, 1936.
6	2, 4, and 6, Margarets Cottages, St. Margarets Road, Pakefield	3	13	26/2/35	30/8/35	Demolished May, 1936.
7	52, 53 and 55 Pakefield Street	3	10	18/4/35		Not confirmed—Demolished September, 1935
8	1-7 Farrow's Yard and 10 and 11 Factory Court	9	33	11/7/35	12/3/36	No. 10, Factory Court demolished, remaining houses
9	1 and 2 Beaumont Cottages	2	5	11/7/35	12/3/36	Houses still occupied. (still occupied.)
10	17, 18 and 19 Rant Score East and 44-52 Anguish Street	8	22	22/10/35	8/12/36	Withdrawn as Clearance Area and included in Re-development Area as Compulsory Pur. Order No. 1
11	48-52a Whapload Road	4	20	22/10/35	8/12/36	C. Pur. O. No. 2
12	3-7 Lincoln's Buildings, 9 East St. and 30, 32 and 34 Whapload Road	9	33	22/10/35	8/12/36	do C. Pur. O. No. 3
13	19, 21 and 23 Anguish Street	3	9	22/10/35	8/12/36	do C. Pur. O. No. 4
14	1 and 2 Herring Fishery Score	2	5	22/10/35	20/10/36	Houses still occupied
15	1-3, Bank Court and 14, St. Peter's Street	4	11	25/11/35	28/9/36	Demolished
16	12-16 Chapel Street	5	11	25/11/35	28/9/36	Houses still occupied
17	5-19, Whitehorse Street	8	33	25/11/35	28/9/36	Houses still occupied
18	1-4 Bishops' Buildings, Mariners St.	4	15	25/11/35	28/9/36	Houses still occupied
19	1-4 Barrett's Buildings, Melbourne Road	4	12	25/11/35	20/10/36	Houses still occupied
20	75, 77 and 79 Crown Street	3	7	25/11/35	28/9/36	Demolished November, 1936
21	6 and 11 Nobb's Buildings, Whapload Road	2	5	25/11/35	28/9/36	Houses still occupied
22	5, 7, 9, 11, Spurgeon Street	4	18	25/11/35	8/12/36	Withdrawn as Clearance Area and included in Re-development Area as Compulsory Pur. Order No. 5
23	1-7 Cook's Buildings, Whapload Road	7	27	25/11/35	28/9/36	Houses still occupied
24	1 and 2 Frost's Alley Score	2	4	25/11/35	28/9/36	Houses still occupied
25	3 and 4 Frost's Alley Score	2	8	25/11/35	28/9/36	Houses still occupied
26	1-4 Horn Hill	4	12	25/11/35	28/9/36	Nos. 1-3 still occupied, No. 4 Demolished.
27	13-17 Marsh Road	5	8	17/12/35		Property demolished as a result of informal action
28	1-5 Sparham's Buildings, Whapload Road	5	20	24/2/36	8/12/36	Houses still occupied
29	5-16 Lighthouse Score	12	26	24/2/36		Clearance Order not confirmed as property is owned by Council
30	1-3 Holly Cottages, Holly Road	3	6	24/2/36	6/10/36	Houses still occupied.
31	1-10 Raglan Cottages, Raglan Street	10	36	22/4/36	7/1/37	Houses still occupied
32	1-4 Infirmary Court	4	8	22/4/36	7/1/37	Houses still occupied
33	16, 17, 18, 20 and 21 St. Margaret's Plain	5	11	22/4/36	7/1/37	Houses still occupied.
34	19, 19a and 21 Dove Street	3	13	22/4/36	7/1/37	Houses still occupied

INDIVIDUAL UNFIT HOUSES

Six houses were dealt with under this heading during the year. In two cases an undertaking was accepted by the Council that the houses would not again be used for human habitation. In the remaining 4 dwellings demolition orders were made.

RE-DEVELOPMENT AREA No. 1—LOWESTOFT

During the year an inquiry was held by the Ministry of Health into the objections received against the re-development plan in connection with the above area. The Council's proposals were subsequently confirmed by the Ministry.

At the end of the year steps were being taken to treat for or compulsorily acquire the properties in the area.

SECTION E.

Inspection and Supervision of Food Supplies

MILK SUPPLY

The following is a list of dairymen, etc., on the register during 1937 :—

Cowkeepers producing outside Lowestoft area but	
retailing within area	30
Cowkeepers producing and retailing in Lowestoft area	9
Retailers of bottled milk only	61
Number of dairy premises	49
	<hr/>
	149

Retailers of bottled milk show a tendency to increase. The sale of milk from small general shops, even though sold in the unopened vessels in which it is received, cannot be regarded as really satisfactory, as often the means of storage is unsuitable. Considerable supervision also is necessary to see that the bottles are kept closed, as in the poorer districts of the town there is often a call for a less quantity of milk than one pint or even half-a-pint.

Proceedings were taken in one case against a person for bottling milk other than on registered premises. The defendant was fined £4 and £1 1s. costs.

MILK AND DAIRIES ORDER, 1926, AND THE MILK (Special Designations) ORDER, 1936

Number of samples taken for bacterial content ...	14
Number of samples taken for tubercle bacilli	16

Two producer retailers are licensed to sell Tuberculin Tested Milk. There are also three holders of supplementary licenses to sell Tuberculin Tested Milk. Sampling under this heading is in the hands of the East Suffolk County Council.

One wholesale producer and retailer and five retail dairies were licensed to sell Pasteurised Milk during the year. The fourteen samples taken during the year all proved satisfactory.

MEAT

Slaughterhouses.

There are 16 private slaughterhouses in the Borough, two of which are registered and 14 licensed. 2,750 visits were paid to these premises by the Inspectors during the year.

There is no public abattoir in the Borough ; at the same time the butchers do everything in their power to co-operate with the Public Health Department so that this work is carried out satisfactorily.

During the year 2,563 carcasses were inspected. The total amount of meat condemned as unsound and unfit for food amounted to 20,907 lb., of which 18,690 lb., or 89.39% was tubercular.

CARCASSES INSPECTED AND CONDEMNED.

	Cattle, ex- cluding Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed (if known)	—	—	—	—	—
Number inspected	1323	13	11	395	821
All diseases except Tuberculosis— Whole carcasses condemned ...	—	—	—	1	2
Carcasses of which some part or organ was condemned	65	—	—	1	2
Percentage of the number inspected infected with disease other than tuberculosis	4.91	—	—	.51	.49
Tuberculosis only— Whole carcasses condemned ...	8	—	—	—	—
Carcasses of which some part or organ was condemned	251	7	—	—	40
Percentage of the number inspected affected with tuberculosis	19.58	53.85	—	—	4.87

It is estimated that approximately 80% of pork is slaughtered outside the Borough.

190 visits were paid in respect of the retail sale of meat.

There is no scheme under Part III of the Public Health (Meat) Regulations, 1924 in force in the Borough.

OTHER FOODS

Other articles found unfit for human consumption and accordingly condemned, were as follows:—

Legs of Pork	...	...	...	...	154 lbs.
Cooked Ham (Tinned)	...	...	...	...	96 lbs.
Chestnuts	...	...	...	...	224 lbs.
Pate de fois	...	...	...	...	2 lbs.
Fish	...	...	...	...	954 lbs.
					<hr/> 1,430 lbs. <hr/>

Ice Cream.

The Lowestoft Corporation Act of 1934 provides among other things, for the registration of manufacturers, vendors, merchants and dealers in ice cream and similar commodities within the Borough.

These additional powers have proved very helpful in controlling the manufacture and sale of this article and also in obtaining accurate information as to the number of people dealing in it.

110 persons are registered to deal in this commodity.

One hundred and thirty-three inspections were made of premises and barrows.

No action was found to be necessary.

Bakehouses.

There are 42 Bakehouses in the Borough, of which one is underground. Very few are modern in type, but they are all clean and without gross errors. Eighty-four inspections were made of these premises.

Two notices were served with respect to various defects during the year.

FOOD AND DRUGS (ADULTERATION) ACT, 1928

The Authority is the County Council, but by agreement the Act is administered by the Local Authority, and samples are taken by the Sanitary Inspectors.

During the year 150 formal and 8 informal samples were taken under the Acts. Of the formal samples 5 were non-genuine, two of which were "Repeat" samples taken in consequence of a previous adverse report. Information was forwarded to the East Suffolk County Council. In the third case a "Repeat" sample was found to be satisfactory.

The non-genuine samples were all of milk and in every instance were from farms outside the Borough.

Informal Sampling of Milk

During the year the Council decided to devote more attention to the informal sampling of milk. A "Gerber" outfit was provided in August and 56 informal samples of milk were examined in the four remaining months. Examinations were carried out by the staff of the department.

Ten samples were found to be deficient in fat varying from 3% to 27%.

Investigation invariably followed these adverse reports either by interview of the vendor or by reference to the East Suffolk County Council where the supply came from a source in the area of that authority.

Repeat samples taken at a later date proved to be satisfactory.

The cost of examination of informal milk samples of this nature is almost negligible and at the same time results in much quicker action being possible where necessary.

MILK AND CREAM REGULATIONS, 1901 AND 1912

Eighteen samples of milk were examined during the year, but in no instance was any preservative detected.

TUBERCULOSIS ORDER, 1925

Sixteen samples of milk were examined by animal inoculation for the presence of tubercle bacilli, all of which were from herds outside the Borough, with the exception of two. One was reported to contain tubercle bacilli, and the circumstances reported to the County Medical Officer of Health.

PUBLIC HEALTH (CONDENSED MILK) REGULATIONS, 1923
AND 1927

Two samples were taken, both of which complied with the declaration on the label.

PUBLIC HEALTH (DRIED MILK) REGULATIONS, 1923 AND 1927
No action taken.

CHEMICAL AND BACTERIOLOGICAL EXAMINATION OF FOOD

Chemical analyses of food samples are carried out by Mr. W. Lincolne Sutton, Public Analyst, Norwich, and bacteriological analyses by The Clinical Research Association, Ltd., Adelphi, London.

NUTRITION

The importance of increasing the public knowledge on the essentials of adequate nutrition, especially for children, is always kept in mind by the local health department. The diffusion of such knowledge forms a considerable proportion of the work of infant welfare centres, school clinics, and the home visiting by health visitors.

During the inauguration of the Milk in Schools Scheme in the Borough during the year considerable publicity was given to the importance of fresh milk in the diet of the school child. This work has been continued by means of posters and talks by teachers and school nurses.

A Maternity and Child Welfare exhibition was held for one week after the opening of the South Welfare Centre in November, where by specimen meals as well as by charts, posters and talks stress was laid on the importance of a balanced diet and on the need for first-class food constituents in the diets of the expectant mother, the infant and the toddler. In the dental section of the exhibition the importance of dietetic factors in the prevention of dental disease was given full publicity. In addition to the attendance of the general public visits were arranged for the attendance of classes of school children.

SHELL-FISH (MOLLUSCAN)

There are no shell-fish beds or layings in the district.

Effort is made by inquiry to secure that all shell-fish marketed in the district is derived from layings known to be under the supervision of other sanitary authorities.

SECTION F

Prevalence of, and Control over Infectious and Other Diseases

Notifiable Diseases in 1937

The following diseases were notifiable in the Borough of Lowestoft :—

Smallpox
Scarlet Fever
Diphtheria and Membranous Croup
Erysipelas
Enteric Fever (including Para-typhoid Fever)
Typhus Fever
Relapsing and Continued Fever
Tuberculosis (all forms)
Ophthalmia neonatorum
Cerebro-spinal fever
Acute poliomyelitis
Acute polioencephalitis
Encephalitis lethargica
Acute Primary Pneumonia
Acute Influenzal Pneumonia
Puerperal Fever
Puerperal Pyrexia
Cholera
Yellow Fever
Dysentery
Malaria
Trench Fever
Measles and German Measles } *first child in household under five*
Whooping Cough } *years*
Food Poisoning (Under Lowestoft Corporation Act, 1934)

NOTES.—No other diseases were added to this list by the action of the Local Authority during the year.

Puerperal Fever and Continued Fever ceased to be notifiable on 1st October, 1937, by direction of the Public Health Act, 1936, while by the Borough of Lowestoft (Measles, German Measles and Whooping Cough Regulations) Rescission Order, 1938, the diseases named ceased to be notifiable from the 8th March, 1938.

Notifiable Diseases (other than Tuberculosis).

The incidence of notifiable disease during the year is shown in the three following tables. The first table sets out the total notifications with the number of cases admitted to hospital and the total deaths, the second table shows the distribution in age groups, and the third gives their incidence in the various wards in the Borough.

Disease	Total Cases Notified	Cases admitted to Isolation Hospital	Total Deaths
Smallpox	—	—	—
Scarlet Fever	70	59	1
Diphtheria	11	11	—
*Enteric Fever (including Para-typhoid)	11	11	—
Puerperal Fever	1	1	—
Puerperal Pyrexia	7	—	—
Pneumonia	46	—	28
Ophthalmia Neonatorum	4	—	—
Erysipelas	25	2	—
Acute Poliomyelitis or polio-encephalitis	4	2	—
Whooping Cough (under 5 yrs.)	44	1	3
Measles (under 5 yrs.) ...	74	1	—

Disease	Age Groups												Total Cases Notified
	Under 1 year	1-2	2-3	3-4	4-5	5-10	10-15	15-20	20-35	35-45	45-65	65 and over	
Smallpox	—	—	—	—	—	—	—	—	—	—	—	—	—
Scarlet Fever	—	—	2	5	4	35	16	3	3	1	1	—	70
Diphtheria	—	—	—	—	2	2	—	3	3	1	—	—	11
*Enteric Fever (including Para-typhoid)	—	—	—	—	—	1	3	—	—	3	3	1	11
Puerperal Fever	—	—	—	—	—	—	—	—	1	—	—	—	1
Puerperal Pyrexia	—	—	—	—	—	—	—	1	5	1	—	—	7
Pneumonia	2	2	2	—	—	8	1	1	7	5	13	5	46
Erysipelas	1	—	—	—	1	1	—	—	3	5	11	3	25
Ophthalmia neonatorum	4	—	—	—	—	—	—	—	—	—	—	—	4
Acute poliomyelitis or polio-encephalitis	—	—	—	—	—	2	2	—	—	—	—	—	4
Whooping Cough (under 5) ...	3	11	10	8	12	—	—	—	—	—	—	—	44
Measles (under 5) ...	7	16	17	18	16	—	—	—	—	—	—	—	74
Totals	17	29	31	31	35	49	22	8	22	16	28	9	297

Disease	Wards					Total	Cases removed to Isolation Hospital
	North	South	East	West	Qulton Broad		
Smallpox	—	—	—	—	—	—	—
Scarlet Fever	13	33	6	11	7	70	59
Diphtheria	2	6	1	1	1	11	11
Enteric Fever (including Para-typhoid)	3	1	5	2	—	11	11
Puerperal Fever	—	—	—	1	—	1	—
Puerperal Pyrexia	1	2	1	2	1	7	1
Pneumonia	13	8	5	12	8	46	—
Erysipelas	6	8	4	6	1	25	2
Ophthalmia neonatorum ...	—	3	—	1	—	4	—
Acute Poliomyelitis or polio-encephalitis	1	1	—	2	—	4	2
Whooping Cough (under 5)	10	13	12	7	2	44	1
Measles (under 5)	19	24	11	18	2	74	1
Totals	68	99	45	63	22	297	88

*One cases of paratyphoid fever notified on the 1st January, 1938, and included in the Registrar-General's return for the 52 weeks ending 1st January, 1938, is included in these figures for 1937.

The following intimations were received from Head Teachers of elementary schools in the Borough in regard to the incidence of infectious disease among school children.

<i>Measles</i>	398
<i>Whooping Cough</i>	61
<i>Mumps</i>	561
<i>Chickenpox</i>	177
<i>Scarlet Fever</i>	24
<i>Diphtheria</i>	1
	<hr/>
	1,222

The table below compares the notifications of all infectious diseases, including Tuberculosis, during 1937, with the figures for the five preceding years.

Disease Notified	Years					
	1932	1933	1934	1935	1936	1937
Smallpox	—	—	—	—	—	—
Diphtheria	6	16	65	100	21	11
Scarlet Fever	20	82	337	60	43	70
Pneumonia	30	25	17	32	43	46
Erysipelas	7	9	22	19	15	25
Puerperal Fever and Pyrexia ...	12	11	10	6	7	8
Ophthalmia Neonatorum	8	6	2	9	4	4
The Enteric Fevers	5	6	1	98	8	11
Encephalitis Lethargica	—	1	1	—	—	1
Poliomyelitis and Polio-encephalitis	—	—	1	—	—	4
Cerebro-Spinal Fever	—	—	1	1	—	—
Dysentery	—	—	—	—	—	12
Measles (under 5 years)	—	—	64	—	37	74
Whooping Cough (under 5 years)	28	1	7	53	18	44
Tuberculosis (Pulmonary)	51	48	67	40	37	42
Do. (Other)	21	19	19	25	37	10

There follows brief epidemiological notes on the features of the more important infectious diseases occurring in the area during the year :—

(a) *Smallpox.*

There were no cases during 1937.

(b) *Scarlet Fever.*

During the year, 70 notifications were received. For each quarter the numbers were 12, 10, 23 and 25, and the highest incidence fell in the south ward of the town with 33 cases, the area most affected being around Morton Road and Pakefield, where the infection kept recurring intermittently during the last two quarters.

With a few exceptions the type of disease noted was mild and complications were few. One fatality did however result in a case where endocarditis developed after discharge from the Isolation Hospital, where the case had been uncomplicated and the detention time normal. Towards the end of the year cases of a rather septic type occurred sporadically in North Lowestoft. In a period between definite epidemics, such as the year 1937, scarlatina is a very indefinite clinical entity, and many septic throats are equally infectious as cases which develop a scarlatiniform rash. However, a small yearly number of cases of a mild type is possibly even advantageous in decreasing the susceptibility of the whole community and so lessening the likelihood of widespread epidemic prevalence in a future year.

(c) *Diphtheria.*

The incidence of diphtheria was exceptionally low during the year, only 11 cases being notified, the quarterly incidence being 0, 4, 4 and 3. No deaths occurred from the disease against an average of 6.3 deaths for the three preceding years.

Of the 11 notified cases, only 5 presented a true clinical picture of any severity, 3 of these being admitted from the South ward in the second quarter of the year.

That the infecting organism was still present in the area was suggested by its recovery in several throats whose clinical picture was very much that of a mixed infection with streptococci. Also towards the end of the year two cases of clinical diphtheria more severe than any of those notified occurred co-existent with scarlatinal illness in the Isolation Hospital. One was found combined with the notified disease of scarlet fever at the time of admission, while the other occurred shortly after admission, at a different period of time, in a small ward where there was no question of cross infection within the hospital. Such liability of scarlet (and to a less extent measles) to invasion by dormant organisms is generally recognized. The facts would suggest that the epidemo-

logical state of the Borough during the year was such that, by reason of a high incidence of diphtheria in the years 1934—35 with a considerable death rate, the general resistance of the community was fairly high. The potential infection would appear to be still present in the community, but the organism in an inter-epidemic phase would appear to have little invasive power except where local tissue resistance is lowered by other infections.

There is unfortunately no indication from the known epidemiology of diphtheria infection that the present happy situation will continue to exist for any number of years.

(d) *Enteric Fevers.*

No typhoid infection was known to occur within the borough during the year but 11 cases of paratyphoid fever were notified, the quarterly distribution being 1, 0, 2 and 8 (including one case notified 1/1/38). At least one case (in the third quarter) was probably infected outside the town, but the small group of 8 during the last quarter of the year gave reason for anxiety and much active investigation at the time. These cases were distributed fairly widely in the borough with no direct contact between individual cases and were not confined to any age or social group, though 5 of the 8 were of the female sex over 35 years. Exhaustive enquiry into all possible vehicles of infection common to the cases relieved each in turn from any suspicion, and the final conclusion could be drawn that a single source of infection common to the whole group could fairly be excluded. It can therefore reasonably be inferred that the sporadic occurrence of this disease during the year was due to raised carrier rate in the population of the area following a high incidence of the illness in the borough in the year 1935. In this connection every effort is made to ascertain by serological and bacteriological examination the possible existence of the carrier state in all contacts of cases or other suspicious persons engaged in the handling of food stuffs or other commodities known to be possible vehicles of infection. Such investigation is non-spectacular and often tedious, but by negative returns it dissipates suspicion and reassures confidence in the safety of channels through which infection can be conveyed. Employers and public are generally found co-operative and anxious to give every assistance in such investigations.

In all cases admission to the Isolation Hospital was obtained. The illness was generally fairly mild, though some cases acute, and the clinical picture was usually genuinely that of the disease. Though one patient had two sharp relapses of the disease, complications were few and complete recovery was the final result in all cases.

One case of a persistent carrier state following an attack of this disease during 1936, whose work involved food handling, was found a safe alternative employment by the Health Committee in the service of the Corporation.

(e) *Puerperal Fever and Puerperal Pyrexia.*

One case of Puerperal Fever and seven cases of Pyrexia were notified, their combined quarterly distribution being 1, 1, 3 and 4. There was no connection between any of the cases and several were due to other causes than puerperal infection. The case rate was low relative both to the country as a whole and the average for the area in previous years. Only one case was admitted to the Isolation Hospital from the Borough area, but 152 nursing visits were paid by the District Nursing Association to four of the cases nursed at home. There were no deaths.

In any administrative control the Medical Officer of Health acts in his capacity as Medical Supervisor of Midwives for the area, but in no case was it necessary to enforce suspension from practice or any action other than occasional directions for the disinfection of the midwife's person and equipment as a precautionary measure.

(f) *Polio-myelitis and Polio-encephalitis*

Four cases of the above diseases, generally considered due to one infecting agent, were notified during the last quarter of the year; one such was later corrected to a terminal diagnosis of encephalitis lethargica. The three undoubtedly genuine cases were all school children, widely separate in their homes, and attending different schools; in two, the date of onset was in early November and in the third, the first day of December. Two showed signs of involvement of brain stem (encephalitic variety); one of these nursed at home displayed a remarkable recovery from a high degree of generalised paralysis, while the second admitted to the Isolation Hospital made a fairly good recovery with some residual paresis of the left hand. The myelitic case made only partial recovery with considerable residual paresis of the extensor muscles of both thighs.

The virus of the disease must have been distributed throughout the area to have caused three definite widely separate cases, but on inquiry there were elicited no other known indications of its presence, such as an increased incidence in children of inexplicable febrile illness or of facial paralysis.

(g) *Dysentery.*

During the month of December 12 cases of dysentery were notified in the Borough, the peak of the outbreak occurring in the second week of the month. This formed part of a wave of greatly increased prevalence of such infection over the greater part of England during the last quarter of the year; its semi-epidemic prevalence was noted in Norwich about one week before the main bulk of notified cases in Lowestoft, while an outbreak of similar type was reported in Ipswich three to four weeks later.

It is probable that there was a very much larger number of cases attacked in the Borough than were notified. The illness

was by no means confined to young children, adult females being also fairly frequently infected, and the Victoria Road—Oulton Broad—area would appear to have been most affected. The illness was generally sharp and of a short duration, strongly suggesting the Sonne type of infection found elsewhere, though no positive bacteriological results were obtained locally.

The epidemiological features of such mild widespread dysenteric infection are obscure and the control of infectious spread is difficult in the present state of medical knowledge of its communication. The chief sanitary action taken in the Borough was the circulation to all dairies, bakeries, hotels, greengrocers, food factories, of a notice, for exhibition in staff lavatory accommodation, which enjoined strict cleanliness of the hands and person of all handlers of food and food stuffs.

(h) *Pneumonia.*

Forty-six cases were notified against a figure of 43 for 1936, the distribution in quarters being 21, 6, 3 and 16. The greatest incidence of the disease continued to occur at the extremes of life, 15 being under 10 years and 17 over 45 years. However, seven cases of acute influenzal pneumonia notified in the first quarter contained four young adults, chiefly males; also two groups of three cases of young adults, one occurring in April and the other in early July, strongly suggested small outbursts of the Summer Type of pneumonia which affects this age group. Below is summarised the notified cases and registered deaths from pneumonia during the last five years.

	1933	1934	1935	1936	1937
Number of Cases	25	17	32	43	46
Number of Deaths	22	18	22	24	28

The conclusion may be drawn that the notification of this disease is far from complete.

(i) *Erysipelas.*

Twenty-five notifications of the infection were received. The quarterly distribution of the cases was 2, 6, 5 and 12, the increased prevalence during the last quarter co-inciding with other evidence of an increased presence of an invasive streptococci during that period. Only two cases were admitted for treatment to the Isolation Hospital.

(j) *Ophthalmia Neonatorum.*

Four cases were notified, the same low figure as for 1936. All were treated at home and recovery was complete in each instance without any damage to sight. In the treatment of the four cases, 39 nursing visits in all were paid by the staff of the District Nursing Association.

(k) *Measles and Whooping Cough* occurring in children under the age of five have been notifiable since the middle of 1926. The following statement shows the number of notifications under the age of five years and the deaths due to these diseases during the past five years in all children.

<i>Measles—</i>	1933	1934	1935	1936	1937
Notifications	—	64	—	37	74
Deaths	—	6	—	1	—
<i>Whooping Cough—</i>					
Notifications	1	7	53	18	44
Deaths	2	1	3	—	3

Complicated cases of these diseases are admitted to the Isolation Hospital on request, and practitioners are urged to avail themselves of this facility for skilled nursing where the home conditions are unsatisfactory. Arrangements are also available for the home nursing of necessitous cases by the staff of the District Nursing Association.

(1) *Epidemic Diarrhæa.*

Among the deaths of all children under two years of age, one was attributed to diarrhœa.

ISOLATION HOSPITAL TREATMENT

The following table shows the number of cases admitted during the year to the Isolation Hospital together with the diagnosis on admission :—

Scarlet fever	...	...	...	...	...	58
Diphtheria	...	...	...	...	...	11
Cases for observation	...	...	...	...	...	7
Paratyphoid fever	...	...	...	...	...	10
Poliomyelitis or polio-encephalitis	...	...	...	...	...	2
Erysipelas	...	...	...	...	...	2
Meningitis—suspected cerebro-spinal	...	...	...	...	...	1
Measles, either complicated or from an institution	...	...	...	...	...	3
Whooping cough broncho-pneumonia	...	...	...	...	...	1
Ophthalmia neonatorum	...	...	...	...	...	2
Puerperal sepsis	...	...	...	...	...	3
Pregnant mother at term isolated from infectious household	...	...	...	...	...	1
Infants admitted with mother	...	...	...	...	...	2
Nursing mother admitted with infant	...	...	...	...	...	1
Mastoiditis, possibly scarlatinal	...	...	...	...	...	1

105

The above admissions include seven cases admitted from the County areas to the charge of the East Suffolk Maternity and Child Welfare Committee.

The number of 105 admissions was practically the same as for 1936, a year very similar in its absence of any serious prevalence of infectious diseases. The number of in-patient days was 3,251, the average in-patients per day being 3.9. Two deaths occurred during the year, one from whooping cough pneumonia and one from tubercular meningitis. Twenty-one patients remained in hospital on the last day of the year.

Isolation Policy.

Of 70 scarlet fever notifications it will be seen that 58 were admitted to the hospital. Every effort is made as regards this disease to encourage home nursing where reasonable facilities for isolation exist, but the extensive development of such a policy is hardly likely to be achieved in an area where many of the population are engaged in public service or in trades involving the handling and preparation of food, and where working class housing conditions often prevent any effective home isolation. The period of stay in uncomplicated cases continues at four weeks, and the great majority of cases are discharged after such a period. In such procedure the justifiable risk has to be taken of post-scarlatinal rheumatism occurring after discharge, particularly in adolescents. It is found that the occasional cases of such that do occur give no signs during their hospital stay which can be recognised as a warning.

In diseases such as diphtheria and paratyphoid fever, where hospital treatment is equally if not more important than isolation, every effort is made to obtain the admission of cases to hospital. All such were admitted during the year.

The hospital accommodation can be used to its greatest advantage in the isolation of observation cases, as for example, severe streptococcal throats in members of the staffs of institutions caring for surgical and obstetric cases; also for certain non-notifiable diseases, particularly from institutions or from the port sanitary district; and for serious cases of measles and whooping cough where facilities are not available for efficient home nursing, from acute poverty or other reason. The completion of the projected cubicle block will greatly increase the facilities for the treatment of all the above cases.

In scarlet fever cases serum treatment continued to be used where any moderate severity or anginose condition justified such. As regards diphtheria, no cases were noted during the year to be resistant in response to prompt serum administration in adequate yet not excessive dosage.

Issue of Antitoxic Sera.

For the use of private practitioners a supply of antitoxic serum for treatment continues to be available at the Health Department

and at the Isolation Hospital. During the year, eleven packages of diphtheria antitoxin were issued and in addition one phial of polyvalent antistreptococcus serum. Practitioners are again urged to give adequate doses of antitoxin in all cases of suspected clinical diphtheria unless where immediately admitted to the Isolation Hospital for observation. Their attention is drawn to the fact that the time period lost in waiting for the result of a swab is all-important in treatment, and furthermore an initial negative swab result is not infrequently obtained from a dangerous case of clinical diphtheria.

Artificial Immunization.

The nursing and domestic staff at the Isolation Hospital continue to be tested for susceptibility to diphtheria and where necessary immunized. This facility is also available free at Connaught House Clinic, and a few children have been immunized at the request of parents. Relatively little advantage however is taken of such service, and with the present epidemiological situation in the Borough in regard to diphtheria it would appear from past experience that very poor results would be likely to be obtained from attempts at present to increase the application of this really very valuable measure. It seems probable that only an epidemic will make the community appreciate that such is the only measure at present available which assures almost complete protection for the child against this dangerous disease, at a minimum expense and inconvenience.

State of Acceptance of Vaccination in the Borough.

The figures afforded through the courtesy of the Vaccination Officer show a net percentage of children successfully vaccinated of only 8.7, and excluding those who died unvaccinated a percentage of 9.0, a new low record for the area. The parallel decline throughout the country shows a highly unprotected state of the community which would give cause for great alarm if smallpox infection were introduced.

Prevention of Blindness.

During the year the Health Committee had under consideration the Ministry of Health Circular 1621. After reviewing existing facilities for treatment of persons suffering from disease or injury to the eyes it was agreed that the services of a consultant eye surgeon should be available for any case of ophthalmia neonatorum requiring such while under treatment at the Isolation Hospital. No further action was considered necessary under Section 66 of the Public Health Act, 1925.

TUBERCULOSIS

New Cases and Mortality during 1937.

Particulars of such for the area are given in the following table :—

Age Periods	New Cases				Deaths			
	Respiratory		Non-respiratory		Respiratory		Non-respiratory	
	M.	F.	M.	F.	M.	F.	M.	F.
0-1	—	—	—	1	—	—	—	1
1-5	—	—	1	—	—	1	—	—
5-15	1	1	—	2	—	—	—	1
15-25	4	11	1	2	—	2	1	1
25-35	5	8	2	1	3	3	—	1
35-45	5	—	—	—	3	1	—	—
45-55	2	2	—	—	4	—	—	—
55-65	1	1	—	—	2	1	—	—
65 and up	1	—	—	—	1	—	—	—
	19	23	4	6	13	8	1	4

The ward distribution of the cases notified during the year was as follows :—

	North	South	East	West	Broad Oulton	Total
Respiratory	11	11	6	10	4	42
Non-respiratory	2	2	3	3	—	10
						52

The above cases include both primary cases notified during the year and cases coming to the knowledge of this department otherwise than by notification. The table on page 56 shows the number of such notifications for the previous five years.

The death-rate for respiratory tuberculosis in the Borough was 0.47 per thousand population, and for other forms of tuberculosis 0.11 per thousand. Such figures continue below the average for England and Wales, and show a considerable decline on the figures for previous years.

The number of cases in the Tuberculosis Register at the end of the year was :—

	Male	Female	Total
Respiratory	59	64	123
Non-Respiratory	49	27	76
	108	91	199

No deaths occurred during the year in the area from unnotified cases of tuberculosis. The efficiency of notification of tuberculosis in the area seems satisfactory, and there is no evidence to suggest any wilful neglect or refusal to notify.

No action was required under the Public Health (Prevention of Tuberculosis) Regulations, 1925, (relating to persons suffering from pulmonary tuberculosis employed in the milk trade), or under Section 62 of the Public Health Act, 1925 (relating to the compulsory removal to a hospital of persons suffering from tuberculosis).

DISINFECTION

Disinfection continues to be carried out, without charge, in all cases of notifiable infectious diseases and also after removal or death of tuberculosis patients; in addition, on request, after cases of cancer disinfection of bedding is carried out; also for certain other conditions on payment of a small fee.

Home disinfection is carried out by formalin fumigation or spraying, while bedding and articles of clothing are treated by high pressure steam disinfection at the Borough Isolation Hospital.

During the year 169 rooms were disinfected after infectious disease, and 31 after verminous conditions, while the number of articles dealt with at the Isolation Hospital was as follows:—

Number of articles disinfected...	...	...	1,755
Number of articles destroyed at the request			
of owners	...	...	87
Number of books from infectious houses de-			
tained	...	...	54

Disinfection has probably a certain value but at times undue reliance may be placed upon it to the neglect of the highest methods which must always be the use of soap and water and the admission of sunshine and fresh air. It must be remembered that suspicion in the past fell upon such things as library books before proof existed that the causative organisms of disease are carried and spread in many cases by healthy individuals (termed "carriers"), who themselves may never show any evidence of the disease.

SECTION G.

MISCELLANEOUS

COST OF HEALTH SERVICES

From the figures supplied by the Borough Treasurer the net cost of the various Public Health Services in Lowestoft for the year ended 31st March, 1937, was as follows :—

	<i>Pence per £.</i>
General expenses of Health Department ...	1.10
Sewers and sewage disposal	10.77
Refuse removal and disposal	11.76
Public conveniences	0.93
Isolation Hospital	2.85
Ambulance	0.10
Mortuary	0.04
Contagious diseases of animals	0.02
Port Health Authority	0.23
Food and Drugs Act	0.047
Fountains and troughs	0.007
Tuberculosis Order, 1925	0.005
Meteorological	0.068
Joint Smallpox Hospital	0.039
Maternity and Child Welfare	2.04
Salaries	0.82
Total Health Services	30.826

AIR RAID PRECAUTIONS

The Medical Officer of Health has co-operated in the medical aspects of the above work, and in September of the year drew up a provisional scheme for casualty services and first-aid and decontaminating posts for the Borough, which received the general approval of the County Authorities. He also attended a special short course of one week's duration at the Civilian Anti-Gas School in November, and the work continues of obtaining volunteers for such services and securing arrangements for their training.

SECTION H.

LOWESTOFT PORT HEALTH AUTHORITY

Annual Report for the Year 1937

STAFF

Port Medical Officer :

STUART F. ALLISON, M.B., Ch.B., D.P.H. (until 31/3/37)
VICTOR R. WALKER, M.B., Ch.B., B.Sc., D.P.H. (from 7/6/37)

Deputy Port Medical Officer :

L. GIBSON, M.B., Ch.B., D.P.H.

Port Health Inspectors :

A. ISHERWOOD, C.R.S.I., M.S.I.A., Cert. Meat & Foods Inspector
W. HAWORTH, C.R.S.I., M.S.I.A., Cert. Meat & Foods Inspector

Clerks :

Miss C. E. ABBOTT

F. Buckley

L. V. BAILEY

Rat Catcher :

E. ANSDELL

*The Staff in each case also carry out the work of the Public Health Department
of the Urban Sanitary Authority.*

Offices :

CUSTOM HOUSE BUILDINGS, NORTH QUAY, LOWESTOFT
AND
123, HIGH STREET, LOWESTOFT. (TELEPHONE : LOWESTOFT 782)

I.—AMOUNT OF SHIPPING ENTERING THE PORT DURING THE YEAR 1937

TABLE A.

	Number	Tonnage	Number Inspected		Number reported to be Defective	Number of Vessels on which defects were remedied	Number of vessels reported as having or having had during the voyage infectious disease on board
			By the Medical Officer of Health	By the Sanitary Inspector			
Foreign							
Steamers	86	28,809	—	41	2	2	—
*Motor	6	1,632	—	8	—	—	—
Sailing	—	—	—	—	—	—	—
†Fishing	128	4,481	1	4	—	—	—
Total Foreign	220	34,922	1	53	2	2	—
Coastwise							
Steamers	690	110,114	—	11	—	—	—
*Motor	71	8,090	—	—	—	—	—
Sailing	13	6,522	—	—	—	—	—
Fishing	11,626	458,687	17	100	3	2	—
Total Coastwise	12,400	583,413	17	111	3	2	—
Total Foreign and Coastwise	12,620	618,335	18	164	5	4	—

* Includes mechanically propelled vessels other than steamers.

† Includes 97 British vessels from foreign ports.

II.—CHARACTER OF TRADE OF PORT

TABLE B.

(a) PASSENGER TRAFFIC DURING THE YEAR

No. of Passengers	1st Class	2nd Class	3rd Class	Transmigrants
Inwards	nil	nil	nil	nil
Outwards	nil	nil	nil	nil

There is no passenger traffic at this port, which is not approved under the Aliens Order 1920..

(b) CARGO TRAFFIC

Principal Imports :—

Coal, timber, petroleum, ice and ships' stores, salt, granite, cement, tiles, barley, potatoes, and phosphates.

Principal Exports :—

Fish.

(c) FOREIGN PORTS FROM WHICH VESSELS ARRIVE

Altona, Archangel, Bordeaux, Christiansand, Copenhagen, Cuxhaven, Danzig, Emden, Esbjerg, Ghent, Gdynia, Gronigen, Hamburg, Jacobstad, Langsten, Leningrad, Namsos, Onega, and Torrevieja.

III.—WATER SUPPLY

- (1) *Source of supply for (a) the port, (b) shipping.*

The town supply drawn direct from the main is the source of supply used.

- (2) *Hydrants and Hosepipes. What precautions are taken against contamination?*

These are flushed prior to use.

- (3) *Number of Water-boats and their Sanitary Condition.*

There are no water-boats.

IV.—PORT SANITARY REGULATIONS, 1933

- (1) *Arrangements for dealing with Declarations of Health.*

Declarations of Health, as approved by the Association of Port Health Authorities of the British Isles, are supplied to pilots, agents and customs officers. These, on being completed by the master of the vessel, are usually handed to the customs officials, who, should occasion require it, immediately communicate by telephone with the Port Medical Officer. In addition, the Port Health Inspector is on duty at the port part of each day.

- (2) *Boarding of vessels on arrival.*

All foreign vessels are boarded as soon as possible after arrival by the Port Health Inspector, and later, if necessary, by the Port Medical Officer.

- (3) *Notification to the Authority of inward vessels requiring special attention (wireless messages, land signal stations, information from Pilots, Customs Officers, etc).*

Article VI of the Regulations, with respect to wireless messages, has not been applied to the Port of Lowestoft.

There is a Coastguard Station, which would transmit any message, by way of signalling, to the Customs Authorities and thence, in case of necessity, to the Port Health Authority.

(4) *Mooring stations designated under Article 10.*

In accordance with Article X of the Regulations, mooring stations have been designated as follows :—

(a) *Within the Docks.*

Deep water berth, east inner dolphins.
North side of inner South Pier.

(b) *Outside the Docks.*

The Lowestoft North Roads off Corton.

(5) *Particulars of standing exemptions from the provisions of Article 14.*

Standing exemptions have been granted subject to the approval of the Ministry of Health and Board of Customs and Excise to all vessels other than those " Infected " or " Suspected " in relation to Cholera, Plague, Yellow Fever, Smallpox and Typhus Fever.

In such cases, in the absence of exceptional circumstances, vessels are cleared in the usual manner, without the attendance of the Port Medical Officer. Vessels from " listed " ports on which no case of infectious disease, other than those previously mentioned, has occurred during the voyage, and on which there has been no unusual mortality among rats, are not detained at a mooring station and are granted free pratique without the attendance of the Port Medical Officer.

(6) *Experience of working Article 16.*

During the year there has fortunately been no need to impose any restriction on the boarding or leaving of a ship from a foreign port.

(7) *What, if any, arrangements have been made for :—*(a) *Premises and waiting-rooms for medical examinations?*

The Port Health Authority has an office on the dock, where medical examination may be made.

(b) *Cleansing and disinfection of ships, persons and clothing and other articles?*

The Authority is competent to undertake the cleansing and disinfection of ships, persons, clothing and other articles in respect of the usual type of vessel using the port.

(c) *Premises for the temporary accommodation of persons for whom such accommodation is required for the purposes of the Regulations?*

No special premises for the temporary accommodation of persons for whom such accommodation may be required, has been allocated for this purpose. Should this become necessary, it might be provided at one of the hospitals belonging to the Local Authority.

(d) *Hospital accommodation available for Plague, Cholera, Yellow Fever, Smallpox and other infectious diseases?*

No special hospital accommodation is available for Plague, Cholera or Yellow Fever, except such as could be found at the Lowestoft Isolation Hospital.

There is, also, a special Smallpox Hospital, jointly owned by the local authority and the Lothingland Rural District Council, which fortunately has not been in use for some considerable number of years. Arrangements might be made to make use of this building in case of need. Provision is made at the Borough Isolation Hospital for cases of other infectious diseases.

(e) *Ambulance Transport?*

An ambulance is available for the transport of infectious cases while in case of accident, the local St. John's Ambulance can always be utilized.

(f) *Supervision of Contacts?*

Surveillance of contacts would be undertaken by the Port Medical Officer, if necessary, according to the requirements of the particular disease.

(8) *Arrangements for the bacteriological or pathological examination of rats for plague.*

The bacteriological or pathological examination of rats for plague can be undertaken at the Laboratory at the Borough Isolation Hospital, and at the County Laboratory, Ipswich.

(9) *Arrangements for other bacteriological or pathological examinations.*

Bacteriological or pathological examinations are made at the Clinical Research Association, London.

(10) *Arrangements for the diagnosis and treatment of venereal disease among sailors under international arrangements.*

In November, 1933, a Venereal Disease Clinic, which is under the control of the East Suffolk County Council, was established at the Lowestoft and North Suffolk Hospital. The arrangement is that any case of actual or suspected venereal disease is referred to this clinic, where provision is made for diagnosis, and, if necessary, treatment.

(11) *Arrangements for the interment of the dead.*

There is no formal arrangement for dealing with any death occurring at the Port, but at the same time it is anticipated that in the event of any death in the Port—none occurred during the year—no difficulty would be encountered as there is sufficient mortuary accommodation in the Borough for both infectious and non-infectious cases.

TABLE C.

CASES OF INFECTIOUS SICKNESS LANDED FROM VESSELS

Disease	No. of Cases during the year		No. of Vessels concerned	Total No. of Cases for previous 5 years
	Passengers	Crew		
Para-typhoid B.	—	—	—	1
Pneumonia	—	—	—	3
Influenza	—	9	5	10
Measles	—	—	—	1

TABLE D.

CASES OF INFECTIOUS SICKNESS OCCURRING ON VESSELS DURING THE VOYAGE BUT DISPOSED OF PRIOR TO ARRIVAL

Disease	No. of Cases during the year		No. of Vessels concerned	Average No. of Cases for previous 5 years
	Passengers	Crew		
Scarlet Fever	Nil	1	1	Nil

No case of Plague, Cholera, Yellow Fever, Smallpox or Typhus occurred on any vessel during its voyage to this Port.

CASES OF SICKNESS ENTERING THE PORT DURING 1937

Twenty-two cases of sickness were examined by the Port Medical Officer or his Deputy in vessels entering the port. After the exclusion of any possibility of infectious disease, appropriate action was advised for the disposal of each case for treatment either at home or in hospital.

V.—MEASURES AGAINST RODENTS

(I) *Steps taken for detection of rodent plague :—*

(a) *In ships in the port.*

The Masters of vessels are periodically questioned as to the finding of any unusual number of dead rats.

(b) *On quays, wharves, warehouses, etc., in the vicinity of the port.*

The Port Health Inspectors, the Council's Rat Catcher and the Railway Company's Rat Catcher note any unusual mortality among rats.

- (2) *Measures taken to prevent the passage of rats between ships and the shore.*

Rat guards are available for use in the case of ships coming from an infected or suspected port. During the year there was no occasion to use these.

- (3) *Methods of deratization of:—*

- (a) *Ships.*

This is done by poisoning, trapping and SO² fumigation.

- (b) *Premises in the vicinity of docks or quays.*

By poisoning or trapping.

- (4) *Measures taken for the detection of rat prevalence in ships and on shore.*

Systematic inspections are made of all vessels for evidence of the presence of rats, such as damage, destruction of food and the presence of rat droppings.

- (5) *Rat-proofing.*

- (a) *To what extent are docks, wharves, warehouses, etc., rat-proof?*

The docks themselves are largely constructed of concrete and hence are to a very great extent rat-proof.

The majority of the wharves and warehouses cannot be considered rat-proof, but such premises which are the property of the London and North Eastern Railway Company are systematically inspected by the Company's rat catcher.

- (b) *Action taken to extend rat-proofing.*

- (i) *In ships.*

Masters of vessels are requested to store all foodstuffs, etc., in metal containers and to take steps that no unused foodstuffs or other rubbish is allowed to accumulate in the ship. They are also requested to keep down the number of their rats by trapping and poisoning, etc.

- (ii) *On shore.*

In the past, wood has been largely used in the construction of the docks and wharves; as this deteriorates, the London and North Eastern Railway Company are gradually replacing it with concrete. Sheets of zinc or iron are driven down to the footings of various buildings in attempts to render these rat-proof.

RATS DESTROYED DURING THE YEAR

TABLE E.

(1) ON VESSELS.

Number of Rats	Jan.	Feb.	Mar.	Apl.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total in Year
Black	212	260	200	84	60	24	12	36	24	60	36	48	1056
Brown	—	—	—	—	—	—	—	—	—	—	—	—	—
Species not recorded	—	—	—	—	—	—	—	—	—	—	—	—	—
Examined	—	—	—	—	—	—	—	—	—	—	—	—	—
Infected with plague	—	—	—	—	—	—	—	—	—	—	—	—	—

The above figures are of necessity estimated due to boats leaving for sea immediately after disinfestation work had been carried out.

During the year the Corporation Rat Catcher carried out disinfestation by means of poisoning and trapping on 88 boats, this work entailing 164 visits.

TABLE F.

(2) IN DOCKS QUAYS WHARVES AND WAREHOUSES.

Number of Rats	Jan.	Feb.	Mar.	Apl.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total in Year
Black	—	—	—	—	—	—	—	—	—	—	—	—	—
Brown	—	—	—	—	—	—	—	—	—	—	—	—	—
Species not recorded	—	—	—	—	—	—	—	—	—	—	—	—	—
Examined	—	—	—	—	—	—	—	—	—	—	—	—	—
Infected with plague	—	—	—	—	—	—	—	—	—	—	—	—	—

No figures are available. The Docks, Quays, Wharves, Warehouses, etc., belong to the London and North Eastern Railway Company, who employ their own rat catcher. Arrangements have been made with the Company for his attendance at the Docks for at least two days each month.

TABLE G.

No Plague "Infected" or "Suspected" Vessels or Vessels from Plague Infected Ports arrived in the Port during the year.

TABLE H.

Lowestoft is not a port approved by the Minister of Health for the issue of Deratization Certificates.

VI.—HYGIENE OF CREWS' SPACES

TABLE J.

CLASSIFICATION OF NUISANCES

Nationality of Vessel	Number inspected during the year	Defects of original construction	Structural defects through wear and tear	Dirt, vermin and other conditions prejudicial to health
British	111	nil	nil	3
Other nations	53	nil	nil	2

VII.—FOOD INSPECTION

- (1) *Action taken under the Public Health (Imported Foods) Regulations, 1925 (amended 1933), the Public Health (Preservatives, etc. in Food) Regulations, 1925 (amended 1926 and 1927) and the Public Health (Imported Milk) Regulations, 1926.*

With the exception of fish there is very little importation of food to the port.

According to the figures given by the Ministry of Agriculture and Fisheries, the weight and values of fish landed at Lowestoft during the year were as follows :—

				Quantity (cwts.)	Value (£)
Trawl Fish	...	...	...	168,727	317,141
Herrings	...	...	...	940,060	378,167
Mackerel	...	...	...	552	547
Sprats	...	...	...	4,854	2,752
By Foreign Vessels...	...	...	...	1,990	1,134
				1,116,183	699,741
Shellfish				Quantity (cwts.)	Value (£)
Norway lobsters	...	...	...	359	400
Queens and Escallops	...	...	...	11	6
Whelks	...	...	...	18	5
Shrimps	...	...	...	418	763
Lobsters	...	348	...	—	22
Oysters	...	100	...	—	—
					1,196

During the year 954 lb. of fish were surrendered as being unfit for human consumption.

- (2) *Shell Fish.*

There are no shell fish beds in this area.

- (3) *Number of Samples of Food examined by :—*

(a) Bacteriologist.	Nil.
(b) Analyst.	Nil.

Report of the Chief Sanitary Inspector

SANITARY INSPECTOR'S OFFICE,
CONNAUGHT HOUSE,

To His Worship the Mayor, Aldermen and Councillors of the Borough of Lowestoft.

MRS. ALDERMAN HARRIS AND GENTLEMEN,

I have pleasure in submitting my Fifteenth Annual Report, which is a resumé of the work carried out during the year 1937.

Infection and Disinfection.

During the year 90 cases of infectious disease were inquired into.

Scarlet Fever	...	...	...	...	...	69
Diphtheria	...	...	...	...	...	11
Para typhoid B	...	...	...	...	...	10

Information gained as a result of inquiry into these cases is submitted to the M.O.H. and dealt with according to his instructions.

In addition to the above cases, disinfection was carried out in 48 other cases of infectious disease. There were also 31 houses disinfested on account of their verminous condition.

Bakehouses.

There are forty-two bakehouses in the Borough.

Eighty-four inspections have been made during the year. Cleanliness and limewashing have been usually well maintained. There is one underground bakehouse.

Ice Cream Premises.

The provisions of the Lowestoft Corporation Act, 1934, provide for the registration of all manufacturers and dealers in ice-cream.

This power has enabled the department to exercise a better control of the sale of this commodity than in the past.

One hundred and thirty-three inspections were made of the 110 registered premises.

Factories and Workshops Acts.

Six notices were received from H.M. Inspector of Factories. 98 visits to workshops and workplaces were made.

The following nuisances were discovered and dealt with :—

Want of cleanliness	...	...	...	...	6
Defective drains	...	...	...	...	4
Other nuisances	...	...	...	...	5
Sanitary Accommodation	{	Unscreened...	...	...	—
		Unsuitable or defective	...	...	1
		Not separate for sexes	...	...	1
		Insufficient	...	...	3

Slaughterhouses.

There are sixteen slaughterhouses in the Borough, two of which are registered and fourteen licensed. 2,750 visits have been made to these premises. The general cleanliness of the premises is good.

During the year 20,907 lb. of meat was voluntarily surrendered and condemned as unfit for human food.

Inspections were carried out in accordance with the terms of Memo 62 (Foods).

In addition to the five regular slaughtering days, when notice of intention to slaughter is not required to be sent to the Corporation, 263 notices have been received of intention to slaughter outside agreed hours.

Foods condemned.

During the year the following articles of food were found unfit for consumption and accordingly condemned :—

Fish	...	...	...	...	...	954 lb.
Chestnuts	...	...	...	...	...	224 lb.
Legs of Pork	...	...	...	...	...	154 lb.
Cooked Ham	...	...	...	...	...	96 lb.
Pate de Foie	...	...	...	...	...	2 lb.
Total						1,430 lb.

Milk and Dairies (Consolidation) Act, 1915.

Under this Act 16 samples of milk were taken during the year. One of these was reported to contain tubercle bacilli after animal inoculation. Information was forwarded to the County Medical Officer of Health.

Dairies, Cowsheds and Milkshops.

There are 149 persons registered for the carrying on of such businesses.

Sixty-one of these are registered for the purpose of selling milk only in the unopened bottles in which they are received.

One hundred and fifty-nine inspections have been made on the various premises, etc.

Sterilizing plants are fixed in practically every dairy in the Borough.

Stables.

Periodical visits have been made to these premises in order to minimize nuisances from accumulation of manure, refuse, etc., and to keep the places clean. Notice was served in one case.

Rats and Mice (Destruction) Act, 1919.

During the year 1,366 visits have been made under the above Act in the Urban and Port Sanitary Districts. It was found necessary to serve six notices during the year to compel action under the Act. Almost invariably the work had been put in hand as a result of the visit of the Rat Officer.

The sanitary inspectors paid 259 visits to boats, business premises, etc., under the Act.

In addition, the Corporation employ a full-time Official Rat Catcher, and the following is a summary of the work carried out by him during the year :—

					No. of visits
Business Houses	...	...	...	...	772
Private Houses	...	...	...	...	196
Boats	...	...	...	...	124
Premises made Rat-proof	...	...	...	...	15

The methods employed are chiefly poisoning, trapping and the use of cyanogas, where the latter is advisable.

The docks, which are the property of the L. & N.E. Railway Company, are disinfested by their own official, who pays periodical visits during the year, while some of the boat-owning Companies also employ their own men. No definite record as to this work is available.

Water Samples.

Ten samples of water were submitted, five each for chemical and bacteriological examinations from the public supply. Two samples each for chemical and bacteriological examination were taken from two private wells.

Those from the public supply were found to be satisfactory.

The well water proved to be subject to intermittent pollution and are to be further investigated.

Four samples of bath water, two from the salt water bath and two from the fresh water bath, were submitted for bacteriological examination during the year. The former proved to be satisfactory; the latter were not so satisfactory, and the attention of the department concerned was drawn to the matter.

Housing Inspections.

A total of 946 visits were made during the year in respect of housing defects under either the Public Health or the Housing Acts.

Two hundred and fifty-two houses were rendered fit as a result of informal action, and 90 houses after the service of statutory notices.

Shop Acts, 1912-1936.

In addition to the provision of sanitary conveniences, ventilation and temperature, attention has been devoted to the closing of shops, in which connection a total of 667 visits have been made.

Legal proceedings were taken in one instance in connection with the employment of a young person for more than the number of permitted hours. The defendant was fined £1 and 10s. costs.

Four other cases for selling goods after the hours permitted were pending at the end of the year.

Smoke Observations.

The Council has not adopted bye-laws under the Smoke (Abatement) Act, 1926, but there is a resolution to the effect that the emission of black smoke for a period of more than three consecutive minutes or a total of five minutes in a period of 30 minutes shall be considered a nuisance liable to be dealt with under the Public Health Acts. During the year 7 observations were taken.

In the event of the above times being exceeded, the manager of the firm has invariably been interviewed and, if possible, the fireman, efforts being made to interest both persons into the question of more careful stoking. Several improvements were carried out to furnaces where this was found necessary. Considerable improvement has been effected.

Petroleum Acts.

In addition to the statutory duties of the office, this work is also carried out by the sanitary inspectors. 118 premises are licensed for the storage of petroleum and carbide of calcium. The premises are periodically inspected. 241 visits were paid to these premises.

Hackney Carriages, Pleasure Boats, etc.

The sanitary inspector attends at the yearly inspection of such vehicles to see that the requirements of the bye-laws controlling the above are carried out.

Common Lodging Houses.

There are two common lodging houses. Sixty-four visits were paid to them in order to see that they were being properly conducted and complying with the Council's bye-laws. No further action was found to be necessary during the year.

Fried Fish Shops.

Such businesses are included in the list of offensive trades which may not be established without the consent of the Corporation.

There are 52 such premises in the Borough, to which 167 visits were made during the year. The businesses are usually well conducted and kept in a cleanly state.

Port Sanitary Authority.

1,250 inspections have been made by the sanitary inspectors during the twelve months under report, of which 164 were visits paid to vessels entering the port, the remainder being inspections of the fish docks, etc.

Tabulated record of sanitary work carried out during the year.

Informal Notices	...	...	...	...	245
Number of Statutory Notices served				...	106
Total Number of Inspections and Re-Inspections					10,816
Number of Complaints dealt with	...		...	...	329

Food and Drugs Adulteration Act, 1928.

The sanitary inspectors carry out the duties of taking samples under these Acts on behalf of the East Suffolk County Council.

Details will be found in Section E of the Report of the Medical Officer of Health.

I am,

Mr. Chairman and Gentlemen,

Your Obedient Servant,

A. ISHERWOOD,

Chief Sanitary Inspector.

